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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

AMENDED
NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Nov 15 12 02 PM '65

I. Operator
MURPHY H. BAXTER
Address
1126 Vaughn Building, Midland, Texas 79704
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Change of Lease Name

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State 13	Well No. 4	Pool Name, Including Formation Maljamar (G-SA)	Kind of Lease State, XXXXXXXXXX
Location Unit Letter J ; 1980 Feet From The East Line and 1980 Feet From The South Line of Section 13 , Township 17-S Range 32-E , NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas-New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Room B-2, Phillips Building, Odessa, Texas					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 18	Twp. 17-S	Rge. 33-E	Is gas actually connected? Yes	When 3-13-59

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X) X	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>		
Date Spudded 2-16-59	Date Compl. Ready to Prod. 3-13-59	Total Depth 4432'	P.S.T.D. 4420'
Pool Maljamar	Name of Producing Formation Grayburg-San Andres	Top Oil/Gas Pay 4029'	Taking Depth 3961'
Perforations 4029'-38', 4087'-98', 4113'-42', 4157'-69', 4186'-93', 4347'-62'		Depth Casing Shoe 4430'	
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE 12-1/4" 7-7/8"	CASING & TUBING SIZE 8-5/8" 5-1/2" 2-3/8"	DEPTH SET 207' 4430' 3961'	SACKS CEMENT 125 sxs 150 sxs & 1200 gals. Cealment

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

W. H. Jensen
(Signature)

PETROLEUM ENGINEER
(Title)

November 10, 1965
(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only for changes of owner well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiple completed wells.