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DISTRIBUTION			
SANTA FE			
FILE			
u.s.g.s.			
LAND OFFICE			ļ
TRANSPORTER	OIL		
	GAS		
OPERATOR			1

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DISTRIBUTION	NEW MEXICO OIL C	CO OIL CONSERVATION COMMISSION Form C-104			
SANTA FE	RECUEST FOR ALLOWABLE Supersedes Old C-104 and C-11				
FILE	AND Effective 1-1-65				
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
LAND OFFICE					
TRANSPORTER OIL					
GAS					
OPERATOR					
PRORATION OFFICE					
Operator					
Charles B.	Gillespie, Jr.				
Address	1179 Midland Texas 797	701			
P. O. Box Reason(s) for filing (Check proper b	T1/	Other (Please explain)			
New We!l	Change in Transporter of:				
	Oil Dry Go	as			
Recompletion Change in Ownership	Casinghead Gas Conde		"N" Unit #4		
Change in Ownership	0.4400,300				
If change of ownership give name and address of previous owner					
I. DESCRIPTION OF WELL AN Lease Name	D LEASE Lease No. Well No. Pool No.	ame, Including Formation	Kind of Lease		
State G	4 Sa	unders Permo-Penn	State, Federal or Fee State		
Location			1 - 7 7		
Unit Letter K ; 19	180 Feet From The South Lin	ne and 1980 Feet From T	ne West		
Line of Section	Township 15-S Range	33-8 , NMPM, Les	County		
I DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL GA	AS T A			
Name of Authorized Transporter of	Oil or Condensate	Address (Give address to which approv	ed copy of this form is to be sent)		
		P. O. Box 1979. Address (Give address to which approv	Tulsa, Oklahoma		
Amoco Pipeline Name of Authorized Transporter of	Casinghead Gas or Dry Gas				
Warren Petroles	um Corneration	P. O. Box 1589. Is gas actually connected? Whe	Tulsa, Oklahoma 7410		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n		
give location of tanks.	н 4 15-8 33-1	yes	unknown		
If this production is commingled	with that from any other lease or pool,				
V. COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'		
Designate Type of Comple		New Well Workover Bespen	1		
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Date Spudded	Date Compi. Reddy to Fied.	Total Boytin			
COLUMN TO THE CO	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth		
Elevations (DF, RKB, RT, GR, etc	Nume of Producing Communication				
Perforations			Depth Casing Shoe		
Perforditions					
	TUBING, CASING, AN	ID CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
HOLE SIZE					
			<u> </u>		
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load oil	and must be equal to or exceed top all		
OIL WELL	able for this c	depth or be for full 24 hours)			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	t, etc.)		
.			Choke Size		
Length of Test	Tubing Pressure	Casing Pressure	Chore Size		
		Water Dhia	Gas-MCF		
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	- 17104		
			1		
GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate		
Actual Prod. Test-MCF/D	Length of Test	Data, Contambate, Mayor	-		
		Casing Pressure	Choke Size		
Testing Method (pitot, back pr.)	Tubing Pressure	Odernd Liesagra			
		011 0011055111	ATION COMMISSION		
VI. CERTIFICATE OF COMPLI	ANCE				
		APPROVED AUG	<u>6 1971 19</u>		
I hereby certify that the rules a	and regulations of the Oil Conservation		201		
Commission have been compli	ed with and that the information give		111/1/		

above is true and complete to the best of my knowle

Charles B. Sellerpie & (gb)
Owner (Title)
August 4, 1971

SUPPLIES SOR ASTRICT I

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 only Sections I, II, III, and VI 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 multiply completed wells.

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AUC (1971)

OIL CONSERVATION COUNT.