OF COPI.	EIVED		
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR	·		
BBODATION		-	

110

DISTRIBU	TION							
SANTA FE			NEW MEXICO OF	L CONSERVATION COMM	ISSIC	Fo	rm C-104	
FILE		<del></del>	REQUE	ST FOR ALLOWABLE		Su	Supersedes Old C-104 and C-	
U.S.G.S.		AUTUOS	21717121	AND		Et	fective 1-1-6	5
LAND OFFICE		AUTHOR	RIZATION TO	TRANSPORT OIL AND N	NATURAL	GAS -	• •	4. D.
TRANSPORTE	R OIL GAS				•	· 12	22 M	<b>'</b>
OPERATOR	GAS				· .			
I. PRORATION C	FFICE	<b></b>			M	AY 1, 1971 DMPANY C	O. STAND	APD OU
Operator	17702				C(	DMPANY C	DE TEXAS	'ARD OIL' <del>IS CHANG.</del>
Standard	Gil Compai	ny of Texas	- A Divi	sion of Chevron O	il Com	GUIS ORE	RATING N	JAME TO
Address		<del></del>			<u> </u>	EVRON O	IL COMPA	1.01.10
3610 Ave	nue S - 1	Bnyder, Texa	a 705kg				- , , ,	W11.
Reason(s) for fili	g (Check proper l	box)	- 177.7	Other (Please	analati i	· · -		
New Well		Change in T	Fransporter of:					
Recompletion		011	$\Box$			tery loc	eation	
Change in Owners	hip	Casinghead	_ [	ndensate effect	ive 8-1	-69.		
If change of own	ership give name							· · · · · ·
and address of p	evious owner	<del></del>						
II DECCRIPATION	0.00							
II. DESCRIPTION Lease Name	OF WELL AN		ool Name, Includin					
Wall damen	(Grayburg)			-	Kind of Leas			Lease No.
Location	(Grayours)	Unit 67 M	WITH CONT.	rayburg-San Andre	te, Feder	ıl or Fee	Tee	
	•	((0		"				·
Unit Letter	<u> </u>	660 Feet From	The <b>South</b>	Line and660	_ Feet From	The	lest	
I Ima a Coassi	11	Township 178	1	201	_			
Line of Section	44	Township 4	Range	32 <b>x</b> , NMPM,		<b>e</b> 8.		County
III DECIGNATION	05 mm						· · · · · · · · · · · · · · · · · · ·	<del></del>
Name of Authorize	d Transporter of	RTER OF OIL A	ND NATURAL	GAS				
		-	densate	Address (Give address to	which appro	ved copy of th	is form is to	be sent)
Texas-Her	Mexico F	ipeline Comp	eny	P. 0. Box 1				
		Casinghead Gas 🍱	or Dry Gas	Address (Give address to	which appro	ved copy of th	is form is to	be sent)
Phillips	Petroleum	<del></del>		P. O. Box 6	666, Ga	essa, Te	XAS	
If well produces o		Unit Sec.	Twp. Rge.	Is gas actually connected	i? Wh	en		
give location of to	nks.	H 10	179 3	Yes	l			
If this production	is commingled t	with that from any o	other lease or por	ol, give commingling order	number:			
IV. COMPLETION	DATA							
Designate T	ype of Complet	tion $-(X)$	Well Gas Well	New Well Workover	Deepen	Plug Back	Same Resty	Diff. Res'v.
	, pe or complete	·			!	1		1
Date Spudded		Date Compl. Read	dy to Prod.	Total Depth		P.B.T.D.	<del></del>	<del></del>
	·							
Elevations (DF, R.	KB, RT, GR, etc.,	Name of Producin	ng Formation	Top Oil/Gas Pay	· <u></u>	Tubing Dep	th	
Perforations						Depth Casir	ng Shoe	<del></del>
							., 000	
		TUB	ING. CASING. A	ND CEMENTING RECORD		<u>L </u>		
HOL	ESIZE		TUBING SIZE	DEPTH SET				
				DEFINSE		SA	CKS CEME	NT
						<del> </del>		
					<del></del>	<b></b>	<del></del>	·
					<del></del>	<del> </del>		
V TEST DATA AN	D DEOLIECT	EOD AT TOWART				1		
V. TEST DATA AN OIL WELL	D REQUEST	FOR ALLOWABL	E (Test must be	after recovery of total volume depth or be for full 24 hours)	of load oil	ind must be eq	qual to or exc	eed top allow-
Date First New Oil	Run To Tanks	Date of Test		Producing Method (Flow,	1//			
				Producing Method (Fibw,	pump, gas tif	t, etc.)		
Length of Test		Tubing Pressure			··			
		I dotted Linearite		Casing Pressure		Choke Size		
Actual Prod. During	Test							
Actaer Prog. Dutin	, , 401	Oil-Bbls.		Water - Bbls.	-	Gqs-MCF		
l								
GAS WELL		<del></del>						
Actual Prod. Test-	MCF/D	Length of Test		Bbis. Condensate/MMCF	·	Gravity of C	ondensate	
1		1		1		1		

Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) 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.

J. D. Webb	40 Mebb	
	(Signature)	
Lead_Product:		
	(Title)	
August 4, 19	59	

OIL CONSERVATION COMMISSION AUG 7 1969

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 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