NO. OF COPIES RECEIVED			
DISTRIBUTION	NEW MEXICO OU C	ONSERVATION COMMISSION	Form C-104
SANTA FE		EOD ALLOWARIE	Supersedes Old C-104 and C-11
FILE	NEG0201	AND	OFFICE Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	AND 110635 INSPORT OIL AND NATURAL	GAS .
LAND OFFICE		MAR	16 21 AM 255
TRANSPORTER GAS			~* nii OJ
OPERATOR			
PRORATION OFFICE			
Cperator	of Texas, a div. o	f Colifornie Oil Co	mnan v
Address			·mherr?
3610 Ave. S,		Other (Please explain)	
Reason(s) for filing (Check proper box)	Change in Transporter of:	, , , , , , , , , , , , , , , , , , , ,	r and operator
Recompletion	Oil Dry Ga	Tanana of the	
Change in Ownership	Casinghead Gas Conden		
If change of ownership give name		Box 123. Maljama:	r. N. M.
and address of previous owner			
I. DESCRIPTION OF WELL AND I	Well No. Pool Na	me, Including Formation	Kind of Lease
Mitchell Federal	4 Mal	.jamar (G-SA)	State, Federal or Fee Fed
Unit Letter A ; 330	Feet From The North Lin	e and 330 Feet From	The East
Line of Section 8 , Tow	vnship 178 Range 3	32 E , NMPM, Lea	County
I. DESIGNATION OF TRANSPORT	PED OF OH AND NATURAL CA	S	
Name of Authorized Transporter of Oil		Address (Give address to which app	roved copy of this form is to be sent)
Continental Pipeli Name of Authorized Transporter of Cas	ne Co.	Artesia, N. M. Address (Give address to which app	roved copy of this form is to be sent)
Phillips Petroleum	1	Bartlesville, Ok	la.
If well produces oil or liquids,	Unit Sec. Twp. Rge. 0 8 178 32E	Is gas actually connected?	When 12-6-63
give location of tanks.	'		12-0-03
If this production is commingled wit	h that from any other lease or pool,	give commingling order number:	
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	n = (X)	1	
Designate Type of Completic	1 - (11)		
Date Spudded	Date Compl. Ready to Frod.	Total Depth	P.B.T.D.
		Total Depth Top Oil/Gas Pay	F.B.T.D. Tubing Depth
Date Spudded	Date Compl. Ready to Prod.		Tubing Depth
Date Spudded	Date Compl. Ready to Prod.		
Date Spudded	Date Compl. Ready to Prod. Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Date Spudded Pool Perforations	Date Compl. Ready to Frod. Name of Producing Formation TUBING, CASING, ANI	Top Oil/Gas Pay CEMENTING RECORD	Tubing Depth Depth Casing Shoe
Date Spudded	Date Compl. Ready to Prod. Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Pool Perforations	Date Compl. Ready to Frod. Name of Producing Formation TUBING, CASING, ANI	Top Oil/Gas Pay CEMENTING RECORD	Tubing Depth Depth Casing Shoe
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Pool Perforations	Date Compl. Ready to Frod. Name of Producing Formation TUBING, CASING, ANI	Top Oil/Gas Pay CEMENTING RECORD	Tubing Depth Depth Casing Shoe
Pool Perforations HOLE SIZE	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a	Top Oil/Gas Pay DEPTH SET Ofter recovery of total volume of load of	Tubing Depth Depth Casing Shoe
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0/S D, C. HELM

Production Foreman

February 26, 1965

(Signature)

(Title)

D. C. Helm

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.

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

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 multiply completed wells.