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	GAS	
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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

JUL 29 11 39 AM '65

I. Operator **Standard Oil Company of Texas**
A Division of Chevron Oil Company formerly California Oil Company

Address **3610 Avenue B - Snyder, Texas**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☐ Oil ☐ Casinghead Gas ☐ Condensate ☐

Change in Ownership ☐

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Eles X Federal	Well No. 8	Pool Name, Including Formation Maljamar Grayburg-San Andres	Kind of Lease State, Federal or Fee Federal
Location Unit Letter N ; 330 Feet From The East Line and 1980 Feet From The West			
Line of Section 10 , Township 17S Range 32E , NMPM, Lee 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 Pipeline	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 type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 6666, Odessa, Texas					
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 10	Twp. 17S	Rge. 32E	Is gas actually connected? Yes	When Immediately following well completion

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)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" 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 6-5-65	Date Compl. Ready to Prod. 7-25-65		Total Depth 4183'		P.B.T.D. 4150			
Pool Maljamar Grayburg-San Andres	Name of Producing Formation Grayburg-San Andres		Top Oil/Gas Pay 3819		Tubing Depth 3878			
Perforations 3819, 51, 53, 58, 75, 81, 83, 3905, 07, 09, 73, 77, 81, 83, 4117, 19, 25, 27					Depth Casing Shoe 4183			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		305'		200 sxs to surface			
7-7/8"	4 1/2"		4183'		550 sxs.			
4 1/2" casing	2-3/8"		3878'					

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 allowable for this depth or be for full 24 hours)

OIL WELL

Date First New Oil Run To Tanks 7-24-65	Date of Test 7-25-65	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure None	Casing Pressure None	Choke Size None
Actual Prod. During Test 2 BO	Oil-Bbls. 2	Water-Bbls. 1	Gas-MCF 9.78

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.

B. Davidson (Signature)
Lead Drilling Engineer (Title)
July 28, 1965 (Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

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 multiply completed wells.

INCLINATION REPORT

ONE COPY MUST BE FILED WITH EACH COMPLETION REPORT

Field Name Maljamar (Grayburg-San Andres) County Lea **JUL 29 11 39 AM '66** ~~Dist. No.~~
Standard Oil Company of Texas
Operator A Division of Chevron Oil Company Address 3610 Avenue S City Snyder, Texas
formerly California Oil Co.
Lease Name & No. Tles X Federal Well No. 8 Survey _____
Location: Unit N, Section 10, T-17S, R-32E, Lea County, New Mexico

RECORD OF INCLINATION

[illegible]

Was survey run in Tubing _____ Casing _____ Open Hole XXX
 Distance to nearest lease line 330 feet
 Distance to lease lines as prescribed by field rules 330 feet

Certification of personal knowledge Inclination Data:

I hereby certify that I have personal knowledge of the data and facts placed on this form, and that such information given above is true and complete.

Signature

Company

Operator Affidavit:

(Note: Party making affidavit must strike out inapplicable phrases, and must file explanatory statement when applicable.)

Before me, the undersigned authority, on this day, personally appeared B. Davidson, known to me to be the person whose name is subscribed hereto, who, after being duly sworn, on oath, states ~~that he is the operator of the well identified in this instrument (that he is acting at the direction and on behalf of the operator of the well identified in this instrument), and that such well was not intentionally deviated from the vertical whatsoever.~~

Matthew Lead Drilling Engineer
Signature and Title of Affiant

19 65 Sworn and Subscribed to before me, this the 28 day of July ,

Notary Public in and for Scurry
County, Texas.

PRC Use Only:

Approved By: _____
Title: _____
Date: _____