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LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

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

AUG 27 11 23 AM '65

I. PRORATION OFFICE

Operator **Standard Oil Company of Texas**
a Division of Chevron Oil Company formerly California Oil Co.

Address **3610 Avenue S, Snyder, Texas**

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:		Other (Please explain)	Note correct location of tanks.
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Dry Gas	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	Condensate	<input type="checkbox"/>

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Battery 4 Iles Federal Report 2	Well No. Pool Name, Including Formation 36 Maljamar Grayburg-San Andres	Kind of Lease State, Federal or Fee Federal
Location		
Unit Letter B	660 Feet From The North Line and 1980 Feet From The East	
Line of Section 15	Township 17S	Range R-32E , 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"/>	Address (Give address to which approved copy of this form is to be sent)	
Texas New Mexico Pipeline Company	P.O. Box 1510, Midland, Texas	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Corp.	P.O. Box 6666, Odessa, Texas	
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 15
	Twp. 17S	Rge. 32E
	Is gas actually connected? Yes	When Immediately following completion of well

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5-25-65	Date Compl. Ready to Prod. 6-16-65	Total Depth 4200'	F.B.T.D. 4150'					
Pool Maljamar Grayburg-San Andres	Name of Producing Formation Grayburg-San Andres	Top Oil/Gas Pay 3809'	Tubing Depth 3898					
Perforations 3809, 11, 13, 41, 43, 45, 47, 51, 53, 75, 77, 79, 3903, 05, 49, 51, 87, 89, 91, 93, 4133, 35		Depth Casing Shoe 4200						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8 5/8"		309		200 lbs. to surface			
7 7/8"	4 1/2"		4200		650 lbs.			
4 1/2" casing	2 3/8"		3898					

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 7-21-65	Date of Test 7-24-65	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 20	Oil - Bbls. 20	Water - Bbls. 3	Gas - MCF 55.4

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
Lead Drilling Engineer

August 26, 1965

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