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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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

SEP 15 12 49 PM '65

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

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

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

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

Recompletion ☐ 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 Iles Federal	Well No. 38	Pool Name, including Formation Maljamar (Grayburg-San Andres)	Kind of Lease State, Federal or Fee Federal
Location			
Unit Letter K ; 1980 Feet From The South Line and 1980 Feet From The West			
Line of Section 9 , Township 17S Range 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"/> Texas New Mexico Pipeline Company	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 checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	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 K	Sec. 9	Twp. 17	Rge. 32	Is gas actually connected? Yes	When Immed. 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 <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 8-4-65	Date Compl. Ready to Prod. 9-5-65		Total Depth 4130'		P.B.T.D. 4093'			
Pool Maljamar (Grayburg-San Andres)	Name of Producing Formation Grayburg-San Andres		Top Oil/Gas Pay 3772'		Tubing Depth 3817'			
Perforations 3772, 74, 76, 78, 3803, 07, 10, 12, 14, 25, 27, 37, 39, 63, 65, 67, 75, 88, 90, 3913, 15, 27, 29, 31, 33, 35, 43, 45, 4064, 79, 81					Depth Casing Shoe 4129'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		297		Circ. to surface			
7-7/8"	5 1/2"		4129		400 sxs. cement			
	2-3/8"		3817					

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)

Date First New Oil Run To Tanks 9-9-65	Date of Test 9-11-65	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure -	Casing Pressure 0	Choke Size -
Actual Prod. During Test 30	Oil-Bbls. 15	Water-Bbls. 15	Gas-MCF 33.83

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.

E. W. McCants (Signature)

District Engineer (Title)

September 14, 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.