HO. OF COPIES REC	EIVED		***						
DISTRIBUTION		T	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104						
SANTAFE			REQUEST FOR ALLOWABLE			1010	Supersedes Old C-104 and C-1		
FILE			AND Effective 1-1-65					-1-65	
U.S.G.S.			AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
LAND OFFICE		1							
IRANSPORTER	OIL			FIAY	2 25	'il '67	. •	•	
	G A S	1					MAY 1, 1970, SI	HO GELGIAL	
OPERATOR							COMPANY OF TE	YASIS CHANC	
PROBATION OFFICE		1					ING ITS OPERATI		
Operator Standa	rd Oil	Compai	ny of Texas				CHEVRON OIL C		
		_	on Oil Compan	y				O/10 /411,	
Address 3610 A									
_	, Texas	79549	9						
Reason(s) for filing	(Check prop				Other (Please	explain)			
New Well			Change in Transporter of: Change of 1				ease name and well number		
Recompletion			On Dry Gas due to unitization.						
Change in Ownershi	P		Casinghead Gas Condensate Formerly:				Iles Federal #39		
If change of owners and address of pre-					,				
DESCRIPTION O	F WELL	AND LE	ASE						
Lease Name				ne, Including Formation		Kind of Lease	_	Lease No.	
Maljamar (G	rayburg)	Unit	44 Maljama	ar (Grayburg-S	an Andres)	State, Federa	l or Fee Federal	NM 0315712	
Location							##J	•	
Unit Letter	<u>.</u> ;	1980	Feet From The	South Line and	660	Feet From "	The West	<u> </u>	

17S

or Condensate

If this production is commingled with that from any other lease or pool, give commingling order number:

Oil Well

Date Compl. Ready to Prod.

Name of Producing Formation

Date of Test

Oil-Bbls.

Tubing Pressure

Length of Test

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.

(Signature)

(Title)

(Date)

Tubing Pressure (Shut-in)

CASING & TUBING SIZE

Township

Unit

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Line of Section

Name of Authorized Transporter of Oil

If well produces oil or liquids, give location of tanks.

Elevations (DF, RKB, RT, GR, etc.)

HOLE SIZE

Date First New Oil Run To Tanks

IV. COMPLETION DATA

Perforations

Length of Test

GAS WELL

Actual Prod. During Test

Actual Prod. Test-MCF/D

District Engineer

April 28, 1967

Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

Continental Pipeline Company
Name of Authorized Transporter of Casinghead Go

Phillips Petroleum Company

Designate Type of Completion - (X)

V. TEST DATA AND REQUEST FOR ALLOWABLE

32E

Yes

Total Depth

TUBING, CASING, AND CEMENTING RECORD

Top Oil/Gas Pay

DEPTH SET

(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)

Producing Method (Flow, pump, gas lift, etc.)

Range

: 32E

Gas Well

or Dry Gas

GPM Gas Corporation

, NMPM,

P. O. Box 6666, Odessa, Texas Is gas actually connected? When

Address (Give address to which approved copy of this form is to be sent)

Plug Back

Tubing Depth

Depth Casing Shoe

SACKS CEMENT

Artesia, New Mexico

EFFECTIVE: February to white perproved copy of this form is to be sent)

C-104 rsedes Old C-104 and C-110

Same Res'v. Diff. Res'v.

Choke Size Coaing Pressure Gas - MCF Water - Bbls. Gravity of Condensate Bbls. Condensate/MMCF Casing Pressure (Shut-in) Choke Size OIL CONSERVATION COMMISSION APPROVED 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 completed wells.