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ì	HO. OF COPIES RECEIVED	1							
ì	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSIC:	Form C-104					
1	SANTAFE		FOR ALLOWABLE	Supersedes Old C-104 and C-110					
	FILE	KEQ0E51	HAND TO SEE S. C. C.	Effective 1-1-65					
			ANSPORT OIL AND NATURAL	245					
	U.S.G.S.		370						
	LAND OFFICE								
	TRANSPORTER OIL		May 1 2 34 PH 67						
	GAS								
	OPERATOR		MAY	1, 1970, STANDARD OIL					
ĩ.									
i.,	Operator Standard Oil Company	ny of Texas		PANY OF TEXAS IS CHANG					
	Standard OII Compan	and Oil Company	ING ITS OPERATING NAME TO						
	A Division of Chev	ron Oil Company	CHE	VRON OIL COMPANY.					
	Address 3610 Avenue S Snyder, Texas 7954	٥							
	Snyder, lexas 7934	7	Other (Please explain)						
	Reason(s) for filing (Check proper box)		Change of lease	name and well number due					
	New Well	Change in Transporter of:	to unitization.						
	Recompletion	Oil Dry Go	is to unitization.						
	Change in Ownership	Casinghead Gas Conder	nsate Formerly: A. C.	Town on Hill 40					
				respect to the					
	If change of ownership give name								
	and address of previous owner								
II.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including F	Cormation Kind of Leas	se Lease No.					
	Lease Name	· ·		i ,					
	Maljamar (Grayburg) Unit	t 60 Maljamar (Gray	burg-San Andres)State, Feder	ree Fee					
	Location								
	T 306	BO Feet From The South Lir	ne and 660 Feet From	The West					
	Unit Letter : 190	restrion the	10 4114						
	10 -	170	32E , NMPM, Lea	County					
	Line of Section 10 Tow	vnship 17S Range	SZE , NAMENI, ECC	·					
III.	DESIGNATION OF TRANSPORT	<u> PER OF OIL AND NATURAL GA</u>	Address (Give address to which appro	and some of this form is to be sent)					
	Name of Authorized Transporter of Oil	or Condensate	Address (Give dadress to which appro						
	Texas New Mexico Pipelia	ne	P.O. Box 1510, Midland	, lexas					
	Name of Authorized Transporter of Cas	inghead Gas X or Dry Gas	Address (Give address to which appro						
	Phillips Petroleum Compa		P.O. Box 6666, Odessa,	Texas					
	Philips recipiedle Compa		'	nen					
	if well produces oil or liquids,	WATER INJECTION WELL							
	give location of tanks.	XXEX							
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:						
W	COMPLETION DATA								
1		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.					
	Designate Type of Completio	n = (X)							
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
	Date Spadded		`						
			Top Oil/Gas Pay	Tubing Depth					
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Ony Sus 1-uy						
				Depth Casing Shoe					
	Perforations			Depth Casing Shoe					
		TUBING, CASING, AN	D CEMENTING RECORD						
	1/OL = 0.75	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
	HOLE SIZE	CASING & FORMS CITE							
				<u> </u>					
T.	TEST DATA AND REQUEST FO	OP ALLOWARIE (Test must be a	after recovery of total volume of load oi	l and must be equal to or exceed top allow-					
٧.		able for this d	epth or be for full 24 hours)						
	Oll. WELL. Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)					
	Date First New Oil Adit 10 Idings								
			Casing Pressure	Choke Size					
	Length of Test	Tubing Pressure	Cdaing Piessme						
				0 1/05					
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF					
	1								
	1	<u> </u>							
	CAC BEST T								
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate					
	ACIUAL PIOG. 1881-MCF/D	Zongin of Loot							
			Contract Charles (T)	Choke Size					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size					
¥ 1W	Opposition of Column 1441	<u> </u>	OIL CONSERV	ATION COMMISSION					
VI.	CERTIFICATE OF COMPLIAN	(記	OIL CONCENT						
			ABBBOVED (, 19					
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED						
	a transfer and an allocation	with and that the information given be best of my knowledge and belief.	l ev						
	above is true and complete to the	a near or my knowledge and perior	BY						
	- 100 - A	~	TITLE						
	Granneth. I.								
	GWIII Camp		This form is to be filed in	compliance with RULE 1104.					

VI.

above	is	true	and	complete	to	the	best	οí	шÀ	knowledge	and	beller.
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E. W		Moda	nto	5								
		-/			(.	Signa	(sure)					

(Title)

(Date)

District Engineer

April 28, 1967

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.