NO. OF COPIES RECEIVED		f		
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104			
SANTA FE		REQUEST FOR ALLOWABLE  Supersedes Old C-104 of		
FILE		AND Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GPH 165			
LAND OFFICE		lm 17 9 23	AM 02	
IRANSPORTER GAS		Jul 15		
OPERATOR				
I. PRORATION OFFICE				
Address Cities Service	- 011 Company			
Bor 69 - Hobbs	. New Maxico			
Reason(s) for filing (Check proper	$b\delta x$ )	Other (Please explain)		
New Well	Change in Transporter of:	Change well no	me from Corbin-Federal	
Recompletion	Cil Dry C			
Change in Ownership	Casinghead Gas Cond	ensate		
If change of ownership give name and address of previous owner _	Carper Brilling Compen	ny, Inc., Artesia, New Mo	xice	
II. DESCRIPTION OF WELL AN		ame, Including Formation	Kind of Lease	
Carbin MAN		Lengt Graduse SA	State, Federal or Fee	
Location	442		The	
Unit Letter ;	660 Feet From The Horth L	1300	East	
Line of Section ,	Township 8 Range	, NMPM,	Los	
II. DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL G	AS Address (Give address to which appro	oved copy of this form is to be sent)	
Name of Authorized Transporter of	Casinghead Cas Company	Address (Give Mares \$30 Chich H.)	level of American is to be sent)	
Mana		1		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? W	hen	
	with that from any other lease or pool	, give commingling order number:		
V. COMPLETION DATA  Designate Type of Complete	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
12001	Name of Froducing Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shoe	
		ND CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
V. TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be able for this	after recovery of total volume of load oil depth or be for full 24 hours)	l and must be equal to or exceed top allo	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	
GAS WELL	Longth of Tool	Phia Condessate (1945)	Complete of Complete	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Festing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
		ABBROVED	APPROVED 19	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given			, 19	
	d with and that the information giver the best of my knowledge and belief.			
1				

This form is to be filed in compliance with RULE 1104.

TITLE.

Ophobition (Signature)

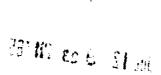
District Clerk (Title)

July 1, 1965

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.



The second state of the constant of the second state of the secon

and the control of th

In the control of the c

were the fair explicit