DISTRIBUTION	i Billion and the contract of	ONSERVATION COMMISSIC	Form C. D.
SANTA FE		TOP ALLOWABLE	Form C+704 Superceder Old C+104 and C+11
FILE		OKA	ਹਿ/fective 1-1-65
U.S.G.S.	_ AD HORMATH WORLD HEA	MIRORY OIL AND NATURAL CA	
IMANSPORTER GAS			
OPERATOR			
PROPATION OFFICE			
TEXACO Inc.			
	bbs, New Mexico 882	Other (Please explain) - 00	
New Well	Zhange II. Transporter of:	Other (Please explain) Eff Change Lease N	
Recompletion Change in Ownership	Cs: Dry Ta Lasta Aread Six Control	New Mexico 'X'	
If change of ownership give name and address of previous owner			
I. DESCRIPTION OF WELL AND	1.EASU	remation Kind of Lease	
Vacuum Grayburg San Andres Unit	Vacuum Gra 38 San Andres	yburg State, Federal a	Fen B-1446
· -	980 Garth South	/ 	East
Line of Section 2 To	whahir 18-S Adnes	3 4-e , nmfm,	Lea County
I. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S Ajarees (Give address to which approved	to any cithis term is to be sent
Name of Authorized Transporter 3: 10. Texas-New Mexico Name of Authorized Transporter of Ca		P. O. Box 1510, Midl. Andress Give address to which approve	and. Texas 79701
Name of Authorized Transporter of Ca Phillips Petroleum		P. O. Box 666, Odes	
(if well produces on a lagrans,	్రామం కార్యాలు సింగ్ కుమెం.		
give location of tanks.	F 2 18-S34-E		NA
If this production is communicated with V. COMPLETION DATA	f); that from was other lease or pool.		CTB = 73
Designate Type of Completi			e ug huak - Same Mesh. Din. Mesh.
Date Spudded	Date Court, Prack to Prod.	Total Depth	
Elevations (DF, RKR, RT, GR, erc.)	Name of Programmy Formation	Top ON/Gas Pay	Daning Tepto
			Penti, Casing Shoe
Perforations			
		DEPTH SET	SACKS CEMENT
HOLESIZE	CASING & TUBING SIZE	<u> </u>	
	OR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil an oth or be for full 24 hours)	d must be equal to an expeed top allow-
OIL WELL Date First New Cil Hun To Tanks		Producing Method (Flow, pump, gas lift,	eic.,
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Dil-Bbls.	Water-Bbls.	Gas - MGS
GAS WELL		Sale. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Langth of Tast		
Testing Method (pitot, back pr.)	Tubing Preseure (Shut-in)		Choxe Size
I. CERTIFICATE OF COMPLIAN	CE	OIL CONSERUMINON COMPUSSION	
I hereby certify that the rules and regulations of the Oil Conservation		Joe D. Ramey Dist. I, Supv.	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Joe D. Ramey	
apone is time and combined to the	e best of my knowledge and belief.	BY Dist. I. S	ney
above is true and complete to the	e best of my knowledge and believ.	BY Dist. I, Sup	ney

Assistant District

January 5, 1973

Superintendent

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 POLE 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.

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.