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LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR				
PRORATION OF				
0 -4:-				

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

TRANSPORTER GAS	4			· ,	
OPERATOR	1				
PRORATION OFFICE					
Murphy H. Baxter	r				
Address 814 Building of th	e Southwest, N	Aidland, Tex	as 79701		
Reason(s) for filing (Check proper box)	)		Other (Pleas	e explain)	
New Well	Change in Trans	sporter of:	_		
Recompletion	Oil	Dry Go	ıs 🔲		
Change in Ownership	Casinghead Gas	S Conde	nsate		<del></del>
f change of ownership give name and address of previous owner	Pan American	Petroleum	Co., Box 68, Ho	bbs, New Mexico	
DESCRIPTION OF WELL AND	LEASE	Name, Including F	Cormation	Kind of Lease	Lease No.
State "CL"			Rivers Queen	State, Federal or Fee <b>State</b>	8713
Location Unit Letter B;	30 Feet From The	, North Li	ne and 1980	Feet From The <b>East</b>	
Line of Section 7	wnship 18-S	Range	34-E , NMP	M, Lea	County
DESIGNATION OF TRANSPOR' Name of Authorized Transporter of Oil	or Condens		Address (Give address	to which approved copy of this form	is to be sent)
Texas-New Mexico Pipel			Box 1510, Mid		
Name of Authorized Transporter of Case Phillips Petroleum Co.	singhead Gas o	r Dry Gas		to which approved copy of this form os, New Mexico	is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec.	18S 34E	Is gas actually connect Yes	when 9-24-62	
If this production is commingled wi	th that from any oth	er lease or pool,	give commingling ord	er number:	
COMPLETION DATA	Oil Wel	ll Gas Well	New Well Workover	Deepen Plug Back Same	Res'v. Diff. Res'v.
Designate Type of Completic	on = (X)	!			į
Date Spudded	Date Compl. Ready	to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations				Depth Casing Shoe	
	TUDI	IC CASING AN	D CEMENTING DECO	PD.	
HOLE SIZE	CASING & T		D CEMENTING RECO		CEMENT
HOLE SIZE	CASING & I	OBING SIZE			
TEST DATA AND REQUEST FOIL WELL	OR ALLOWABLE	(Test must be a able for this d	epth or be for full 24 hou		or exceed top allow-
Date First New Oil Run To Tanks	Date of Test		Producing Method (Flo	ow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure		Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.		Water-Bbls.	Gas-MCF	
GAS WELL				<del></del>	
Actual Prod. Test-MCF/D	Length of Test		Bbls. Condensate/MM	CF Gravity of Condens	sate
Testing Method (pitot, back pr.)	Tubing Pressure (S	hut-in)	Casing Pressure (Shu	choke Size	
CERTIFICATE OF COMPLIAN	CE		OIL	CONSERVATION COMMISS	SION

V.

V.

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.

mels Petroleum Engineer

December 9, 1968

(Date)

SUPERVISOR DIS RIET

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.