

DISTRIBUTION		NEW MEXICO OIL CONSERVATION COM. ON		Form C-104	
STATE		REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-1	
C.S.		AND		Effective 1-1-65	
D OFFICE		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
TRANSPORTER	OIL				
	GAS				
OPERATOR					
PRODUCTION OFFICE					
Operator					
Grace Petroleum Corporation					
Address					
P. O. Drawer 2358, Midland, Texas 79702					
Reason(s) for filing (Check proper box)					
New Well		Change in Transporter or		Other (Please explain)	
Re-completion		Oil			
Change in Ownership		Casinghead Gas			
If change of ownership give name and address of previous owner					
Cleary Petroleum Corporation, P. O. Drawer 2358, Midland, Tx. 79702					

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Producing Interval	Kind of Lease	Lease No.
State "A"	1	Vacuum Abo, North	State, Federal or Free State	E-5765
Location	Unit Letter	1980	Feet From The	West
			460	Feet From The
				South
Line of Section	1	Township	17-S	Range
			34-E	NMPM, Lea
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	or Condensate	(Give address to which approved copy of this form is to be sent)		
Mobil Pipeline Company		P. O. Box 900, Dallas, Texas 75221		
Name of Authorized Transporter of Casinghead Gas	or Dry Gas	(Give address to which approved copy of this form is to be sent)		
Phillips Petroleum Company		Bartlesville, Oklahoma 74004		
If well produces oil or liquids, give location of tanks.	Unit	Set	Depth	Feet
	N	1	17-S	34-E
			Yes	Unknown

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

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	Workover	Deepen	Re-drill	Side Hole	Diff. Res'tv.
Date Spudded	Date Compl. Ready to Prod.							
Elevations (DE, RKB, RT, GR, etc.)	Name of Producing Formation							
Perforations								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be of sufficient volume of total volume of load oil and must be equal to or exceed top allowable for this well, that be for full 24 hours)

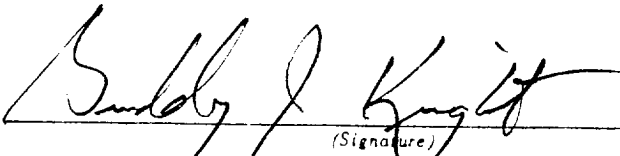
Date First New Oil Run To Tanks	Date of Test	Test Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Well Pressure	Shut-in
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Shut-in

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Well Pressure/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Well Pressure (shut-in)	Shut-in

I. CERTIFICATE OF COMPLIANCE

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)
District Production Manager
(Title)
10-25-78
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 1 1978
Orig. Signed by
Jerry Sexton
Dist 1, Supv.

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 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, name or number, or transporter or other such change of condition.