

DISTRIBUTION		
STATE		
FEDERAL		
U.S.		
D OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

I.

Operator Grace Petroleum Corporation	
Address P. O. Drawer 2358, Midland, Texas 79702	
Reason(s) for filing (check proper box)	
New Well ☐	Change in Transportation ☐
Recompletion ☐	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 Shell "C" State	Well No. 1	Location Vacuum Abo, North	Kind of Lease State, Federal or Fed. State	Lease No. K-4605
Location Unit Letter B ; 800 Feet From The North 2120 Feet From The East				
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 Consignee Mobil Pipeline Company	(Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas 75221
Name of Authorized Transporter of Casinghead Gas ☒ or Consignee Phillips Petroleum Company	(Give address to which approved copy of this form is to be sent) Barlesville, Oklahoma 74004
If well produces oil or liquids, give location of tanks. Unit B ; 1 17-S 34-E	Yes 11-26-74

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	Water Well	Workover	Deepen	Re-Perf.	Same Resv.	Diff. Resv.
Date Spudded	Date Compl. Ready to Prod.		Date Drilled		Date Perforated			
Elevations (DE, RKB, RT, GR, etc.)	Name of Producing Formation		Type of Completion		Length of Casing Shoe			
TUBING, CASING, AND PLUGGING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must show recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

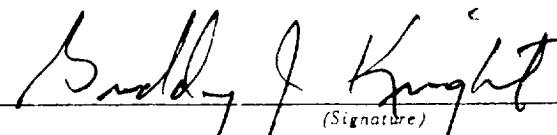
Date First New Oil Run To Tanks	Date of Test	Testing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Coke Size
Actual Prod. During Test	Oil-Bbls.	Gas-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Actual Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Coke Size

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  19
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 of the location on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable for 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.