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U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
		 	_

NEW MEXICO OIL CONSERVATION COMMISSION REQUIEST FOR ALLOWABLE

Form C-104
Conservator Old C-104 and C-

	FILE	4 KEWUESI	FOR ALLOWABLE	Effective 1-1-65						
	U.S.G.S. LAND OFFICE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS									
	TRANSPORTER GAS	_								
	OPERATOR	1								
I.	PRORATION OFFICE	1								
	Manzano Oil Corpora	ation 505/623-19	96							
P.O. Box 2107/Roswell, NM 88202-2107										
	Reason(s) for filing (Check proper box)	Other (Please explain)							
	New Well Recompletion	Change in Transporter of: Oil Dry Go	To notify of co							
	Change in Ownership	Casinghead Gas Conde	= cashiginesa gas	line.						
	If change of ownership give name and address of previous owner									
u.	. DESCRIPTION OF WELL AND LEASE									
	Lease Name Well No. Pool Name, Including Formation Ouerecho Plains Unper									
	Murjo rederal Bone Spring State, rederal or ree NM+25457									
	Unit Letter E ; 1850									
	Line of Section 23 Tov	wnship 185 Range	32E , NMPM, L	ea County						
l.		TER OF OIL AND NATURAL GA								
	Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)									
	Name of Authorized Transporter of Cas Phillips Petroleum C	inghead Gas Cha a sa Dry Gas	Address (Give address to which appro							
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. E 23 /8 32	Is gas actually connected? When the world was the world with the world was the world with the world was the world	10/87						
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,								
	Designate Type of Completio	on - (X) Oll Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Rest						
	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 TUBING, CASING, AN		<u> </u>	Depth Casing Shoe						
			CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT						
}	· · · · · · · · · · · · · · · · · · ·									
ł										
	TEST DATA AND REQUEST FO		fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow						
İ	Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)									
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size						
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF						
ļ		<u> </u>	<u> </u>	!						
,	GAS WELL									
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate						
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size						
Ι.	CERTIFICATE OF COMPLIANC	ERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION								
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.		APPROVED NOV 3 1987, 19								
		Orig. Signed by Paul Kautz								
		TITLE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepenewell, 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.								
lackie Midkiff/Landwoman /////87										
					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					
								P TENENT	·	

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