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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-110
Effective 1-1-65

Operator Standard Oil Company of Texas A Division of California Oil Company	
Address 3610 Avenue B - Snyder, Texas	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner _____

Lease Name State 6-34		Well No. 12	Pool Name, including Formation Vacuum (San Andres)	Kind of Lease State, Federal or Fee State
Location				
Unit Letter J ; 2310 Feet From The South Line and 2310 Feet From The East				
Line of Section 34 , Township 17S Range 35E , NMPM, 10a County				

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
Texas New Mexico Pipeline		P. O. Box 1510 - Midland, Texas	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Corp.		P. O. Box 6666, Odessa, Texas	
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 34	Twp. 17
		Rge. 35	Is gas actually connected? Yes
			When

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

Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5-22-65	Date Compl. Ready to Prod. 6-25-65	Total Depth 4650'		P.B.T.D. 4611'					
Pool Vacuum (San Andres)	Name of Producing Formation San Andres	Top Oil/Gas Pay 4567'		Tubing Depth 4589'					
Perforations 4567, 69, 71, 73, 75		Depth Casing Shoe 4648'							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8-5/8"		1651		900 sxs to surface				
7 7/8"	4 1/2"		4648		650 sxs.				
4 1/2" casing	2-3/8"		4589						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after 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 6-25-65	Date of Test 6-26-65	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure -	Casing Pressure 150	Choke Size -
Actual Prod. During Test 96	Oil - Bbls. 64	Water - Bbls. 32	Gas - MCF 76.8

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE 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 _____, 19____	
BY E. W. McCants District Engineer		BY Joe J. Ramsey	
(Signature)		TITLE _____	
June 28, 1965		This form is to be filed in compliance with RULE 1104.	
(Date)		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 Sections I, II, III, and VI only 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.	