NO, OF COPIES RECEIVED	7		
DISTRIBUTION	MEN MEN MEN OF OU	CONSEDVATION COMMISS	Form C -104
SANTA FE	NEW MEXICO OIL	CONSERVATION COMMISS (
FILE	REQUEST	FOR ALLOWABLE BS OFFICE	6, C, C, Effective 1-1-65
U.S.G.S.	AUTHODIZATION TO TR	AND ANSPORT OIL AND NATURAL APR 1 8 02	C 4 S
LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	יבכ מי מי
OIL	-	76 A D UZ	MI UU
TRANSPORTER	-		
GAS	4		
OPERATOR	4		
PRORATION OFFICE			
Cperator			
Ernest A. Han	is on		
Address		_	
P. 0. Box 151	5, Roswell, New Mex		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry C	Gas	
Change in Ownership	Casinghead Gas Cond	ensate	
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND Lease Name	LEASE Well No. Pool N	ame, Including Formation	Kind of Lease
Mescalero Ridge Ur	it "35" 15 Pe	arl Queen	State, Federal or Fee Federa
Location			
	O Womth	ine and 660 Feet From	The East
Unit Letter A ; 50	Feet From The NOPULE	ine and OOO reet riom	The Bast
35	wnship 19-South Range 3	4-East , NMPM, L	.ea Count
Line of Section 35 , To	waship 19-30d CII Range)	T-Dato , Note IVI,	904
		A.G.	
DESIGNATION OF TRANSPOR		Address (Give address to which appro	oved conv of this form is to be sent)
Name of Authorized Transporter of Oil			
Shell Pipe Line Corp.		Box 1598, Hobbs, New Mexico	
Name of Authorized Transporter of Casinghead Gas or Dry Gas		Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Co.		Bartlesville, Oklahoma	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	hen
give location of tanks.	35 195 34E	Yes	April 1, 1966
		Luius samuinaling ander number	
If this production is commingled wi	th that from any other lease or poor	give comminging order number.	
. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Re
Designate Type of Completic	on $-(X)$ \mathbf{x}		1 1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
· .	1	·	5134*
March 4, 1966	April 1, 1966	5135' dolo.	Tubing Depth
Pool	Name of Producing Formation	Top Oil/Gas Pay	
Pearl Queen	Queen Formation	4585	4585*
Perforations	4855, 4858, 4859,	4957, 4959 & 4971.	Depth Casing Shoe
1 SPF @ 4585, 4599,	4601, 4608, 4617,	4633, 4637, 4738,	51341
	TUBING, CASING, A	ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	2291	150 sx. circulate
7-7/8"	5-1/2"	5134*	350 sx.
/-//0	J-1/2	+ J*J*	
. TEST DATA AND REQUEST F		after recovery of total volume of load of	l and must be equal to or exceed top a
OIL WELL	able for this	depth or be for full 24 hours) Producing Method (Flow, pump, gas	lift ata)
Date First New Oil Run To Tanks	Date of Test		······································
April 1, 1966	April 1, 1966	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	175 lbs.	415 lbs.	1/8"
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF
	52	1	
CAC HIPLY Y			
GAS WELL	Longth of Toot	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	Data, Condensate/MMOF	G.G.T., O. COMMENSATE
lesting Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
CERTIFICATE OF COMPLIAN	ICE	OIL CONSERV	ATION COMMISSION
. CLIVIII IONIL OF COMEDIAN			
I. CERTIFICATE OF COMPLIAN I hereby certify that the rules and		OIL CONSERV	ATION COMMISSION

VI

above is true and complete to the best of my knowledge and belief.

Geologist (Title)

April 2, 1966

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 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.