HO. OF COPIES HECE	IVED		
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FILE			
U.S.G.5.			
LAND OFFICE			<u> </u>
TRANSPORTER	OIL		
	GAS	l	<u> </u>
OPERATOR			
PRORATION OFFICE		<u>L_</u>	

November 1, 1976

(Date)

EW MEXICO OIL CONSERVATION COMMISS. REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL: AND NATURAL GAS

LAND OFFICE					
TRANSPORTER GAS					
OPERATOR			,		
PRORATION OFFICE				· · · · · · · · · · · · · · · · · · ·	
Operator					
Texas American	Oil Corporation				
Address	uite #1012, Midland,	Toyac 79701			
		Other (Please	explain)		
Reason(s) for filing (Check proper box)	Change in Transporter of:				,
New Well	Oil Dry Gas	· C	ective Nov	vember 1, 197	6
Recompletion Change in Ownership X	Casinghead Gas Condens	sate 🔲			
	_		_	- 11 - M	- 75330
If change of ownership give name Hand address of previous owner	larding Oil Company,	4317 Oak Law	n Ave.,	Dallas, Texa	5 /5219
and address of provides					
II. DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation	Kind of Lease		Lease No.
Lease Name Shipp	1 Humble City		State, Federal	or Fee Fee	30478
Location			<u> </u>		
Unit Letter K 23	S10 Feet From The South Line	and2080	Feet From T	he <u>West</u>	
7.7	mship 17S Range 3	87E , NMPN		Lea	County
	and an are associated at Call	c			
II. DESIGNATION OF TRANSPORT	or Condensate	Address (Give address	to which approv	ed copy of this form is t	o be sent)
Texas New Mexico P	ipeline Corporation	Post Office B	0×52332 .	Houston, Texa	s 77052
Name of Authorized Transporter of Cas	inghead Gas 🔼 or Dry Gas 🗔				o be sent)
Phillips Petroleum	Corporation	Bartlesville			
If well produces oil or liquids,	Unit Sec. Twp. Rge. K 11 17S 37E	Is gas actually connect Ye	•	7-3-72	
give location of tanks.	1	1			
If this production is commingled wit	h that from any other lease or pool,	give commingling orde	r number:		
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Res	'v. Diff. Res'v.
Designate Type of Completion			<u> </u>	1 1	
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	
	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producting 1 ormanon				• -
Perforations				Depth Casing Shoe	
, 61.61.21.31.31				<u> </u>	
	TUBING, CASING, AND			T CACHE CE	4 Pm 5 1 mm
HOLE SIZE	CASING & TUBING SIZE	DEPTH S	<u> </u>	SACKS CEN	IEN I
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total vol	ume of load oil	and must be equal to or	exceed top allow-
OH. WELL	4010 707 1333 01	pth or be for full 24 how Producing Method (Flo	e) w. pump. eas lif	t. etc.)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (1 10	, p,	,,	
1 1 T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Tubing Pressure	Casing Pressure		Choke Size	
Length of Test					
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.		Gas-MCF	
				<u> </u>	
•					
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	CF .	Gravity of Condensate	
Actual Ploat 1441- Process					
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shu	t-in)	Choke Size	
		 			. <u> </u>
VI. CERTIFICATE OF COMPLIANCE		OIL	CONSERVA	TION COMMISSIO	N
		APPROVED	INV	<u> </u>	19
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given showe is true and complete to the best of my knowledge and belief.					
		BY	BY Comed My		
(TITLE Des 1 Sept.			
		This form is to be filed in compliance with RULE 1104.			
	/als And	13		Lin for a manulu firili	AC OF CARDEDEC
	aiwe)			nied by a tabulation (
Production Coordin	ator	4111	f this form mu	st be filled out compl	etely for allow-
	tle)	able on new and	ecompleted we	olla.	

able on new and recompleted wells. 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 completed wells.

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C.L. San Commission of the control o