NO. OF COPIES REC			
DISTRIBUTIO	Ī		
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
BROBATION OF			

5-24-67

(Date)

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALECTIVEBLE

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

U.S.	.G.S.		AUTHO	RIZATION T	O TRANSRO		A NATUDAL	CAS		,	
LAN	ND OFFICE				May 25 11	TRANSPORT ON AND NATURAL GAS					
TRA	ANSPORTER	GAS									
OPE	ERATOR										
	DRATION OFF				······						
S C	ontinent	al 011 C	ompany							v	
Addre	. O. Box	460, Ho	bbs, New	Mexico	88240						
1	on(s) for filing (	Check proper bo	)x)			Other (Ple	ase explain)	Change	in nar	140	
New \	Well mpletion		-	Transporter of:	<del></del>	forme	rly Stat	e A-19	No. 1		
ļ	ge in Ownership		Oil Casinghea	d Gas	Dry Gas Condensate	State	AČ effe	ctive 6	<b>-1-67</b> .	•	
Tf ab a					- Condendate						
and ac	nge of owners! ddress of previ	nip give name lous owner									
II. DESC	CRIPTION OF	TWELL AND	LEASE								
Lease	Name	WELL AND			uding Formation		Kind of Leas	e		Lease No.	
Locat				nonume	ot GSA		State, Federa	lor Fee 🌡	tate		
·	L at Letter	1	980	Sout	h	660		Wes	ŧ.		
J On		i	Feet From	The	Line and		Feet From	The			
Lir	ne of Section	L9 To	ownship 19	Ran	ige <b>37</b>	, NMI	PM,	.08		County	
III. DESIG	GNATION OF	TRANSPOR	TER OF OIL	AND NATUD.	AT CAS						
Name	of Authorized T	`ransporter of O	l or Cor	idensate	Addres	s (Give addres	s to which appro	ved copy of th	is form is to	be sent)	
4			Company	or Dry Gas			Midland,				
Wa	rren Pet	roleum (	orporation	)M	Mo	nument,	New Hex	60	is form is to	be sent)	
	l produces oil or ocation of tanks		Unit Sec.	Twp. R		actually conne		n 1-18-5	3		
If this IV. COMP	production is PLETION DA	commingled w	ith that from any		pool, give cor	nmingling ord	ier number:				
De	signate Type	of Completi		Well Gas	Well New We	ell Workove	r Deepen	Plug Back	Same Res!	v. Diff. Res'v.	
	Spudded		Date Compl. Re	ady to Prod.	Total D	Depth		P.B.T.D.	1		
								1.5.1.5.			
Elevat.	ions (DF, RKB,	RT, GR, etc.;	Name of Produc	.ng Formation	Top Oil	l/Gas Pay		Tubing Dep	:h		
Perfor	ations							Depth Casir	ig Shoe		
<del>                                     </del>	HOLES	1ZE		BING, CASING TUBING SIZ	G, AND CEMEN	DEPTH		1			
			- CASING (	. 1001110 312		DEFIN	361	SA	CKS CEME	ENT	
						<u> </u>					
V. TEST	DATA AND	REQUEST F	OR ALLOWAB	LE (Test mus	st be after recov	ery of total vo	lume of load oil o	nd must be se	and to or or		
OIL W	ELL irst New Oil Ru	n To Tanks	Date of Test	able for t	this depth or be	for full 24 hou	rs)			ceed top attow-	
		ii 10 Iunks	Date of Yest		Product	ng Method (Fig	ow, pump, gas lif	, etc.)			
Length	of Test	···	Tubing Pressure		Casing	Pressure		Choke Size			
Actual	Prod. During To		Oil-Bbls.		Water - B	hla	<del></del>				
					""	,516.		Gas-MCF			
· <del></del> -			<del></del>					L			
GAS W	VELL Prod. Test-MC	F/D	Length of Test		Bble Co	ondensate/MM	<del></del>		<del></del>	<del></del>	
		.,_	Long or rest		Bars. Co	ondensate/MM(	UF .	Gravity of C	ondensate		
Testino	g Method (pitot,	back pr.)	Tubing Pressure	(Shut-in)	Casing I	Pressure (Shu	t-in)	Choke Size			
VI. CERT	IFICATE OF	COMPLIAN	CE			OIL	CONSEIRVA	TION COM	MISSION		
						) (					
Commis	sion have be	en complied w	egulations of the	information g	riven	OVED	THE R. L.		<del></del>	9	
above i	above is true and complete to the best of my knowledge and belief.  NMOCC (5) JLW FILE				lief. B						
					TITLE						
	Jusie	I A			11		o be filed in co				
	7;	/\$!==	ture)		If	this is a rec	quest for allowe st be accompan	ble for a ne	wly drilled	or deepened	
	V Sur	ervisin	Engineer	<b>15.</b>	tests	taken on the	well in accord	ance with R	ULE 111.		

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 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.

## HA 25 11 46 NA . 61

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