HO. OF CHEILS HET	KIV#N		
DISTRIBUTE)[4		
SANTA PK			
THE			
U.5.G.5.			
LAND OFFICE			
THANSPORTER	OIL		
THAMS! ON TEN	G A S		
OPERATOR			
PROBATION OFFICE		1	Į

W MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWAILE

Thim C+104 Superseder Old C-104 and C-110

I N C	REQUEST	FOR ALLOWABLE	Effective 1-1-65
U.5.G.5.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE	AOTHORIZATION TO TRA	AND ON FOR AND INTONNE	
TRANSPORTER OIL	-		
G A 5	-		
PRORATION OFFICE	~		
Operator	مراه می از این از این		
AMOCO PRODU	ICTION CO.		
Address C A A C	1 /	10 7037/2	
Reason(s) for filing (Check proper box	LEVELLAND, TEX	A5 79336 Other (Please explain)	
New Well	Change in Transporter of	CHANGE LEASE A	ND WELL NAME FROM
Recompletion	OII Dry Ga	BRADLEY #2 TO S	COUTH HOBBS UNIT #117
Change in Ownership	Casinghead Gas Conder	nsate []	
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND		ormation Kind of Leas	
Lease Name	Well No. Pool Name, including Fo		1 -
SOUTH HOBBS UNIT	117 HOBBS GRAYBU	KE SAN ANDKEST	
Unit Letter P: 990	D Feet From The 50UTH Lin	se and 330 Feet From	The <u>EAST</u>
Olifi Letter	_		
Line of Section 6 Tox	whiship 19-5 Range	38-E , NMPM,	LEA County
DESIGNATION OF TPANSPORT	TER OF OIL AND NATURAL GA	AS .	
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	ved copy of this form is to be sent;
SHELL PIPEU Name of Authorized Transporter of Cas	NE CO	800 WILCO BLOG.	ved copy of this form is to be sent)
	_		
PHILLIPS PETRU	Unit Sec. Twp. P.ge.	BARTLES VILLE, Units gas actually connected?	ELAHOMA en
If well produces oil or liquids, give location of tanks.	T 6 19 38	1	TULY 15, 1954
	th that from any other lease or pool,		
COMPLETION DATA		New Well Workover Deepen	Plug Back Same Resty, Diff, Resty
Designate Type of Completic		New West Workers	
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
			Depth Casing Shoe
Perforations			
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a)	fter recovery of total volume of load oil	and must be equal to or exceed top allow
OIL WELL Date First New Oil Run To Tanks	Date of Tost	pth or be for full 24 hours) Producing Method (Flow, pump, gas li	it, etc.)
Date First New Off Half To Tanks			
Length of Test	Tubing Plessure	Cosing Pressure	Choke Size
		Water - Bbls.	Gas-MCF
Actual Prod. During Test	Oil-Bbie.	Wdier - Dois.	440-11.0.
	1		
GAS WELL			
Actual Fred, Test-MCF/D	Length of Test	Bbls. Condensate/NCCF	Gravity of Condensate
		Casing Pressure (Shut-in)	Choke Size
Teeting Method (pitot, back pr.)	Tubing Pressure (Shuu-lu)	County Freeze (Direct 312)	
CERTIFICATE OF COMPLIANCE	T. T	OIL CONSERVA	TION COMMISSION
CENTIFICATE OF COMPRIMIN	J	11	
I hereby cortify that the rules and r	egulations of the Oil Conservation	APPROVED	s⊎1 J, 19
Commission have been complied w	with and that the information given best of my knowledge and belief.	DY	7
addre de dema and compress to the			
		11	
Connette Brance		sees to a summer for allow	compliance with RULE 1104.
Kenneth Diane	ituro)	well, this form that the second tests taken on the well in according	Died by a tabulation of the collection
Series Stall a	wistant	tents taken on the well in accor	nt he filled out completely for allow
111	(e)	I while on nove and to completed \"	110.
6-28-77		Fill out only Sections I, W	. III, and VI for changes of owner creat other such thanks of condition
B-10 NMOCC, HORRS, 1	-DIV, 1-KWB	II	
	•		

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s. G.S.			
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RANSPORTER	OIL G A S		
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I MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

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

S.G.S. AND OFFICE RANSPORTER GAS PERATOR HORATION OFFICE	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL (GAS	
AMOCO PRODUCTION	COMPANY		,	
P.O. Drawer A, Le	velland, Texas 79336			
roson(s) for filing (Check proper bo		Other (Please explain)		
nange In Ownership	Oil Dry Gas Casinghead Gas Conden	[e From O.O. Bradley to	
change of ownership give name address of previous owner				
TSCRIPTION OF WELL AND THE Name radley	D LEASE Well No. Pool Name, Including Fo			
ration				
Unit Letter P;	990 Feet From The South Line	e and 330 Feet From	The <u>East</u>	
Line of Section 6 T	ownship 19-S Range	38-Е , ммрм,	Lea County	
SIGNATION OF TRANSPORTS of Authorized Transporter of Cohell Pipeline Co.		Address (Give address to which appro 800 Wilco Bldg, Midlan Address (Give address to which appro	d, Tex. 79701	
hillips Petroleum Co		Bartlesville, Oklahoma Is gas actually connected? When		
well produces oil or liquids, we location of tanks.	I 6 19 38	Yes	July 15, 1954 .	
this production is commingled von PLETION DATA	with that from any other lease or pool,			
Designate Type of Complet	ion - (X) Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty,	
zie Spuddød	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
evations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
e:forations			Depth Casing Shoe	
	TUBING, CASING, AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
TST DATA AND REQUEST L WELL	FOR ALLOWABLE (Test must be af able for this de	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow-	
ate First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)	
ength of Test	Tubing Prossure	Casing Pressure	Choke Size	
ctual Prod. During Test	Oil-Bbla.	Water - Bble.	Gas - MCF	
AS WELL		•		
ctual Prod. Teet-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
esting Method (puct, back fr.)	Tubing Preseure (Ehut-in)	Cosing Pressure (Shut-in)	Choke Size	
LRTIFICATE OF COMPLIA	NCE	OIL CONSERVA	ATION COMMISSION	
emmission have been complied	d regulations of the Oil Conservation with and that the information given he best of my knowledge and belief.	TITLE		
	ay W. Cox	If this is a request for ellowell, this form must be accompant tooms taken on the well in accompany.	compliance with RULE 1104. wable for a newly drilled or despensed mice by a tabulation of the deviation reason with RULE 111.	
	ve Assistant	All tections of this form in able on new and recompleted w	ist he filled out completely for allow- ells.	

Fill out only Sections I. H. III, and V. for changes of owner, well name or number, or transporter or other such change of condition.

NO. OF COPIES RECI	EIVED		
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U.\$.G.\$.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

EW MEXICO OIL CONSERVATION COMMISSI 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 OIL			
	OPERATOR GAS			
	PRORATION OFFICE			
••	Operator			
AMOCO PRODUCTION COMPANY				
	P.O. DRAWER A, LEVELLAND, T		Other (Please explain)	
	Reason(s) for filing (Check proper box) New Well	Change in Transporter of:	i e e e e e e e e e e e e e e e e e e e	La fara W X Ria
	Recompletion	Oil Dry Ga	is []	hip from W.K. Byrom
	Change in Ownership	Casinghead Gas Conder	nsate To Amoco Pa	200. Co.
	If change of ownership give name and address of previous owner	W. K. Byrom Box	147 HOBBS, N.M	1. 88240
II.	DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including F		
	O.O. BRADLEY	2 HOBBS GRAYBUR	RG SAN ANDRES State, Federa	ol or Fee FEE
	Location Unit Letter P 99	O Feet From The South Lin	se and <u>330</u> Feet From	The <u>EAST</u>
		10.0	38-E , NMFM,	LFA County
	Line of Section (p Tow	rnship 19-5 Range	JOSE, INPUT M.	LEH Comy
TH.	DESIGNATION OF TRANSPORT		S Address (Give address to which appro	ved copy of this form is to be sent)
		•		
	SHELL PIPELINE CO	inghead Gas or Dry Gas	Address (Give address to which appro	ved copy of this form is to be sent)
	PHILLIPS PETROLEUM	4 .O	BARTLES VILLE, OK Is gas actually connected? Wh	LAHOMA
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	July 15, 1954
	If this production is commingled wit		<u> </u>	000000000000000000000000000000000000000
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, 1711, Resty,
	Designate Type of Completio	n - (X)	1 1 1	
	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	Tuking Depth
	Perforations		<u> </u>	Depth Casing Shoe
		· · · · · · · · · · · · · · · · · · ·		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	NOLE SIZE	CHSING C TOBING CITE		
	``			
N'	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-
٠.	OIL WELL	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas in	
	Date First New Oil Run To Tanks	Date of Test	Producing Mathiod (tow, pamp, gas	,,,,
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bals,	Water + Bbls.	Gas-MCF
	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
VI	CERTIFICATE OF COMPLIANCE	DE	OIL CONSERVA	ATION COMMISSION
lacksquare			19	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED 19	
			BY	
			TITLE	
		0. 1	This form is to be filed in	compliance with RULE 1104.
		Ray W. Cox	" wall this form must be accomp	wable for a newly drilled or deepened snied by a tabulation of the deviation
		 /		
	(Signo Adm	sture) ()	teats taken on the well in acco	rdance with RULE 111.
O	Adm	inistrative Assistant	tests taken on the well in acco	ust be filled out completely for allow-
	Adm	inistrative Assistant	All sections of this form me shie on new and recompleted w	ust be filled out completely for allow- cells. If the and VI for changes of owner,
	Adm 1+ NMOCC-H (TO 1- DIV.	inistrative Assistant 12-30-76	All sections of this form metable on new and recompleted we Fill out only Sections I. well name or number, or transport	ust be filled out completely for allow- cells. II. III, and VI for changes of owner, eter, or other such change of condition.
	Adm 54 · Nmocc - H (Till 1- Div.	inistrative Assistant 12-30-76	All sections of this form mable on new and recompleted w Fill out only Sections I, I well name or number, or transport Seps 7 & Forms C-104 must completed with the Completed win the Completed with the Completed with the Completed with the Co	ust be filled out completely for allow- cells. If the and VI for changes of owner,

NO. OF COPIES RECEIVED DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSI, J SANTA FE Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE FILE AUTHORIZATION TO TRANSPORT OIL AND NATHER GAS 12 35 PM '65 U.S.G.S. LAND OFFICE TRANSPORTER OIL OPERATOR PRORATION OFFICE querator. W. K. Byrom Address Box 147 - Hobbs, N. M. Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion Dry Gas Requested by Commission Thomas in Ownership Casinahead Gas Condensate If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Hobbs San Andres Grayburg State, Federal or Fee Fee 0. 0. Bradley Location 990 Feet From The South Line and 330 East P ; Feet From The Unit Letter , Township 198 38E Lea County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas 🗔 Address (Give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma Phillips Petroleum Co. Unit Twp. Sec. Rae. Is gas actually connected? If well produces oil or liquids, July 15, 1954 6 19S | 38E I If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Cil Well Gas Well New Well Workover Same Res'v. Diff. Res'v. Deeper. Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth Name of Producing Formation Top Oil/Gas Pay Tubing Depth Pool Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE HOLE SIZE DEPTH SET SACKS CEMENT (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL ate First New Oil Hun To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) Length of Test Tubing Pressure Casing Pressure Cheke Size Oil-Bbls. Water - Bbls. Gas - MCF Actual Prod. During Test **GAS WELL** Actual Frod. Test-MCF/D Bbls. Condensate/MCF Length of Test Gravity of Condensate resting Method (pitot, back or.) Tubira Pressure Casing Pressure Choke Size VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION APPROVED : _ . 19 _ 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. QY. TITLE _ 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. Anderson (Signature) Office Mgr. All sections of this form must be filled out completely for allowable on new and recompleted wells. (Title) 7-9-65

(Date)

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.