handy contra necessary	-				
DISTRIBUTION SANTA FE	1	CONSTRUCTION COMMITTEE TOR ALLOWABLE	55(C = 5	Poim C+104 Supersedes () Effective 1-1-	ld C-104 and G-1 65
U.S.G.S. LAND OFFICE TRANSPORTER OIL	AUTHORIZATION TO TR	AND ANSPORT OIL AND N	ATURAL GAS		`
OPERATOR PROBATION OFFICE					
L	A, LEVELLAND, TEX	ly			
P. O. DRAWER 1	A, LEVELLAND, TEX	195 79336			
Reason(s) for filing (Check proper ba New Well Pecampletion Change in Ownership	Change in Transporter of: Oil Dry G		LEASE AND) WELL NAME UTH, HOBBS I	= FROM UNIT #119
If change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, including F	*Cotmatton k	(ind of Lease		Lease No.
SOUTH HOBBS UNIT			itate, Federal or		8-244
Unit Letter ; 33	Feel From The NORTH LI		Feet From The	WE 57	
Line of Section & To	ownship 19-5 Range	38-E , NMPM,	LE.	A	County
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	Address (Give address to			
SHELL PIPELINE Name of Authorized Transporter of Co		Address (Give address to			79 701.
PHILLIPS PETROLES If well produces oil or liquids,	Unit Sec. Twp. Rge.	BARTLES VILLS Is gas actually connected	OKLAHO When	MA	
If well produces oil or liquids, give location of tanks.	C 8 19 38	YES		FC, 28, 19	56
If this production is commingled w. COMPLETION DATA	ith that from any other lease or pool,	give commingling order n	umber:		
Designate Type of Completi	on - (X) Oil Well Gas Well	New Well Workover	Deepen Pl	ug Back Same Res	dv. Diff, Restv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	Р.	B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tu	bing Depth	
Perforations			De	pth Casing Shoe	
		CEMENTING RECORD		21045 651	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEN	CNI
THE DATA AND PROPERT	OR ALLOWARIE (Tourseles	fer recovery of total volums	of load oil and	nust be equal to or e	xceed top allow
TEST DATA AND REQUEST FOIL WELL Date First New Oil Bun To Tonks		pith or be for full 24 hours) Producing Method (Flow, 1			
Length of Test	Tubing Pressure	Casing Pressure		cke Size	
Actual Prod. During Tool	Oil-Bbls. Water-Bbls.		Ga	Gds-MCF	

GAS WELL Bbls. Condensate/MMCF Gravity of Condenecte Actual Fred. Test-MCF/D Length of Test Casing Pressure (Shut-Ln) Choke Size Tubing Pressure (Shut-in) Testing kinihod (pitot, back pr.)

I. CERTIFICATE OF COMPLIANCE

ŧ.

I.

1.

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.

OIL CONSERVATION COMMISSION

APPROVED TITLE _

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly deflict or despected well, this form must be accompenied by a tabulation of the deviation touts taken on the well in accordance with five a 111.

All sections of this form must be filled out completely for allowable on now and is completed wells.

FIII out only Sections I. H. HI, and VI for changes of award, well name or number, or transporter or other such theory of condition.

OND NMOCO, HOURS 1-DIV 1-KIND

HO, OF COMICS RECEIVED		i	
DISTRIBUTION			Γ
ANTA FE			
ILE			
.:.s.G.s.			
AND OFFICE			
RANSPORTER	OIL		
	GAS		
PERATOR]	
PROPATION OFFICE		1	

Div

¥ MEXICO OIL CONSERVATION COMMISSIO. REQUEST FOR ALLOWABLE AND

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RANSPORTER GAS				
PROPATION OFFICE				
erator	TON COMPANY			
AMOCO PRODUCT	TON CUMPANY			
P.O. Drawer A	, Levelland, Texas 79336	Other (Please explain)		
rw Well	Change in Transporter of:			
nange in Ownership	Oil Dry G	H Change Lease No	ame From H. T. Orcutt to	
change of ownership give na	me	ensate [] Orcutt		
SCRIPTION OF WELL A	ND LEASE Well No.; Pool Name, Including	Formation Kind of Lea	Sa	
Orcutt	1 Hobbs Graybur		Lease 140.	
Unit Letter C ;;	330 Feet From The North Li	ine and 2310 Feet From	The West	
Line of Section 8	Township 19-S Range	38-E , NMPM,	Lea County	
	ORTER OF OIL AND NATURAL G			
nell Pipeline Co.	f OII X or Condensate	Address (Give address to which appro		
-ame of Authorized Transporter o	, and the stage in the stage index in the stage in the stage in the stage in the stage in the st		oved copy of this form is to be sent)	
nillips Petroleum Co	s Petroleum Co. Bartlesville, Oklahoma			
: well produces oil or liquids, eve location of tanks.	C 8 19 38	Yes	Dec. 28, 1956	
this production is commingled DMPLETION DATA	d with that from any other lease or pool,			
Designate Type of Comp	etion (X) Gas Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty,	
ate Spuddød	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
.evations (DF, RKB, RT, GR, et	c.j Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
erforations			Depth Casing Shoe	
	TUBING, CASING, AN	D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
· · · · · · · · · · · · · · · · · · ·				
IST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	ifter recovery of total volume of load oil	and must be equal to or exceed top allow-	
I. WFLL are First New Cit Run To Tanks		epth or be for full 24 hours; Producing Method (Flow, pump, gas li	ft, etc.)	
ength of Test	Tubing Pressure	Casing Pressure	Choke Size	
engin di lest	I doing Picasums			
.ctual Prod. During Yest	Oil-Bhis.	Water-Bbis.	Gas-MCF	
AS WELL		•		
ctual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
. esting Method (pitot, back pr.)	Tubing Fressure (shut-in)	Casing Pressure (Shut-in)	Choke Size	
TRIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
merahy cartify that the rules c	ud regulations of the Oil Conservation	ADDDOVED	16	
nereby certify that the rules and regulations of the Oil Conscruation ommission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		BY		
	Λ	TITLE		
-1		This form is to be filed in	compliance with RULE 1104.	
15	ianofre)	well, this form must be accompa-	vable for a newly drilled or despensed nied by a tabulation of the deviation	
	rative Assistant	tests taken on the well in accor	at be filled out completely for allow-	
	(Ville) 1- 21-77	sble on new and recompleted we	illn III, and VI for changes of owner,	
NMOCC-H (Date)		well name or number, or transport	er, or other auch change of condition.	

NO. OF COPIES REC	EIVED		
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROPATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

- 1	SANTAFE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11
	FILE		AND	Effective 1-1-65
}	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURA	L GAS
+	011			
- 1	TRANSPORTER GAS			
Ì	OPERATOR			
	PRORATION OFFICE			
•	Operator			
	AMOCO PRODUCTION	COMPANY		
	Address			
	P.O. DRAWER A. LEVELLAND, T.	EXAS 79303		
	Reason(s) for filing (Check proper box	()	Other (Please explain)	
	New Well	Change in Transporter of:	_ Change in own	vership from W.K. BrRom
	Recompletion	OII Dry G	as	•
	Change in Ownership	Casinghead Gas Conde	ensate to Amoco A	ROD. Co.
,	If change of ownership give name			
	and address of previous owner	W. K. BYROM BOX	147 HOBBS, N.M.	88340
			,	
Η.]	DESCRIPTION OF WELL AND			
	Lease Name	Well No. Pool Name, Including F	<u>.</u>	LC 350 711
-	H.T. ORCUIT	1 HOBBS GRAYBU	RG SAN HINDRES State, Fed	deral of Fee STATE 8-244
]	Unit Letter;;	30 Feet From The NORTH Li	ne and 23/0 Feet Fro	om The
	o _	10.0	30 -	,
Ĺ	Line of Section 8 To	wnship 19-5 Range	38-E , NMPM	LEA County
	DECION ATTION OF THANCHOR	TED OF OUR AND MATURAL CO	• •	
.il.]	Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GA		proved copy of this form is to be sent)
- !	Sur Paris (
H	Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which ap	PIDLAND TEX 7970/ oproved copy of this form is to be sent)
}	^			
	PHILLIPS PETROLEUM	Unit Sec. Twp. Rge.	IS gas actually connected?	When
	If well produces oil or liquids, give location of tanks.	C 8 19 38	i .	DEC. 28, 1956.
L		- 		DEC. 20, 1750.
	I this production is commingled wi COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	
Ī		Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Rest. Pift, Restv.
1	Designate Type of Completion	on = (X)		1 1
F	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
İ				
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tuking Depth
1				
	Perforations			Depth Casing Shoe
L				
		TUBING, CASING, AN	D CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
				·
V. 7	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a		oil and must be equal to or exceed top allow-
	OIL WELL	able for this de	epth or be for full 24 hours)	
	Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow. pump, gas	s lift, etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
-				Gas-MCF
1	Actual Pred. During Test	Oil-Bbls.	Water-Bbls.	Gda - MOF
l_			<u> </u>	
	~			
_	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Actual Prod 681-MCP/D	Length of feat	Bbis. Condensate/MMCF	Gravity of Condensate
-	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
ĺ	reating waters (pitot, back pity	, deriid Liesegie (Sude-III)	Cusing Fressure (Blue-11)	Choke Size
L				
V1. C	CERTIFICATE OF COMPLIANO	CE	OIL CONSER'	VATION COMMISSION
		regulations of the Oil Conservation with and that the information given	APPROVED	<u> </u>
				1 13
		best of my knowledge and belief.	BY	
•	bove is true and complete to the		11	٠-
•	bove is true and complete to the		1	
•	bove is true and complete to the	1	TITLE	
•	bove is true and complete to the		This form is to be filed i	in compliance with RULE 1104.
_		Ray W. Cox	This form is to be filed i	in compliance with RULE 1104.
-	(Signo	Ray W. Cox	This form is to be filed i	in compliance with RULE 1104. lowable for a newly drilled or deepened panied by a tabulation of the deviation
-	(Signo	inistrative Assistant	This form is to be filed in If this is a request for all well, this form must be accome tests taken on the well in accome	in compliance with RULE 1104. lowable for a newly drilled or deepened panied by a tabulation of the deviation

1-. DIV. 1- Susp.

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 amber, or transporter, or other such change of condition.

Separate Forna 104 must be filed for each pool in multiply