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SANTA FE			٠
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U.S.G.S.	<u> </u>		
LAND OFFICE			•
IRANSPORTER	OIL		
	GAS		

point and

	SANTA FE FILE U.S.G.S.	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		Supersedes Old C-104 and C-1 Eliotive 1-1-65	
	IRANSPORTER OIL GAS OPERATOR PROMATION OFFICE	ADTRORIZATION TO TR	ANSPORT OIL AND NATURA	L GAS	
•	Operator	ield Service, Inc.			
.	P. O. Box		U.I.I. II II I		
	Reason(s) for filing (Check proper box) Hobbs, New Mexico 88241 Other (Please explain)				
	New We!! Recompletion Change in Ownership	Change in Transporter of: OI! Dry G Casinghead Gas Conde	Salvage of oil System, app	from Salt Water Disposal Proximately 200 bbls.	
	If change of ownership give name and address of previous owner				
11.	DESCRIPTION OF WELL AND	LEASE			
	State AB	Well No. Pool Name, Including E 1 Eumonit		eral or Fee State E 9122	
		60 Feet From The North Lie	ne and 1980 Feet Fro	om The West	
	Line of Section 3 Tox	waship 19S Range 3	1 F	0.0	
II. <u>J</u>	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA		County	
ſ	Neme of Authorized Transporter of Oil UPG, Icn.	or Condensate	Address (Give address to which app	proved copy of this form is to be sent)	
	Name of Authorized Transporter of Cas	linghedd Gas 🔲 🕆 at Dry Gas 🗀	Address (five address to which app	ouston, Texas 77210-4658 proved copy of this form is to be sent;	
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	N/A Is gas actually connected?	When _	
L	give location of tanks. I this production is commingled with	th that from any other lease or pool,	N/A	N/A	
۷. آ	COMPLETION DATA	TOU Wall I Can Wall	New Well Workover Deepon		
-	Designate Type of Completio	sin - (X) SWD		Plug Back Same Res'y, Diff, Res'y,	
ſ	5-25-71	Date Campl, Ready to Prod.	Total Depth 8170	P.B.T.D. 5700	
	Elevations (DF, RKB, RT, GR, etc.) 3678 GR	Name of Producing Formation San Andres	Top Oil/Gas Pay 4290	·Tubing Depth	
	Perforations 4897-4919		1 4270	2868 Depth Casing Shoe	
		TUBING, CASING, AND	CEMENTING RECORD		
\vdash	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
		Δ_2/Δ	1680	475	
. -	7 7/8	5 1/2	7045	725	
/. 1 (EST DATA AND REQUEST FO		ter recovery of total volume of load or pih or be for full 24 hours)	il and must be equal to or exceed top allow-	
ſ	Date First New Oil Run To Tanks N/A	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
T	ength of Test	Tubing Pressure	Cusing Pressure	Choke Size	
7	Cival Prod. During Test	Oll · Bbis.	Water-Bbis.	Gta - MCF	
- -				<u> </u>	
	AS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis, Condensque/kiNCF	Gravity of Condensate	
-	N/A Feeling Method (pitot, back pr.)	Tubing Pressure (Shut-in)			
L			Casing Pressure (Shut-in)	Choke Size	
	ERTIFICATE OF COMPLIANC		010CHEE	519984 MISSION	
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.		BYEddie W. Seay			
			TITLE Oil & Gas Inspector		
i	Vail A Lela Ole			compliance with NULE 1104.	
	If this is a request for allowable for a newly drilled or deep (Signature) Well, this form must be accompanied by a labulation of the devir tests taken on the well in accordance with AULE 111.			anied by a tabulation of the deviation	
-	All sections of this form must be filled out completely for which on now and recompleted walls.			ust be filled out completely for allow-	
	10105 18	7	Fill out only Sections 1, 11, 111, and VI for changes of owner, well mame or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.		