NO. OF COPIES RECE	EIVED	
DISTRIBUTIO	ОИ	
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL.	
TRANSPORTER	GAS	
OPERATOR		
PRORATION OFFICE		

m.

IV.

NEW MEXICO OIL CONSERVATION COMMISS!

Form C-104

SANTA FE	REQUEST	FOR ALLOWABLE ICE O. C. C.	Supersedes Old C-104 and C-11 Effective 1-1-65
U.S.G.S.	AND TO BE STORY OF THE BUTTON TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE	AUTHORIZATION TO TRA	JUNY TO THE ATT ATT ATT ATT	<i>3</i> 70
TRANSPORTER OIL.		ं न्या गरा प्र	
GAS			
PRORATION OFFICE			
Operator ELLIOTT PRODUCTIO	N COMPANY		
Address			
	oswell, New Mexico		Teat At The managed
Reason(s) for filing (Check proper box)) Change in Transporter of:		Hott Oil, Inc. merged duction Company with
Recompletion		Dry Gas Elliott Production Company, P.O. Box 1	
Change in Ownership X	Casinghead Gas Conden		ico being surviving
If change of ownership give name	ELLIOTT OIL. INC., P.	Corporation. O. Box 1355, Roswell, N	ev Mexico
and address of previous owner			
I. DESCRIPTION OF WELL AND	We'll Us Disc None Including Fo	ormution Kind of Leas	e Lease No.
E. M. Elliott	6 Elliott Ab	いんしょう だしゃ し	i or Fee Finderal IC-065525
Location		0-	
Unit Letter G ; 198	O Feet From The North Lin	e and 1980 Feet From	The East
Line of Section 8 Tov	wnship 218 Range	38E , NMPM,	Les County
	mon on over the statement of	0	
Name of Authorized Transporter of Oil	or Condensate	A ricess (Give address to which appro	ved copy of this form is to be sent)
Shell Pipeline Corpo	ration	P. O. Box 2648, Hous	ton, Texas
Name of Authorized Transporter of Cas	singhead Gas 🗍 - or Dry Clas 📆	A tiress (Give address to which appro	wed copy of this form is to be sent)
	Unit Sea, Owp. Fge.	Is gas actually connected? Wh	.en
If well produces oil or liquids, give location of tanks.	a 8 2 15 38 E	No.	
	th that from any other lease or pool,	give commingling order number:	
. COMPLETION DATA	Oil Wel: Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty
Designate Type of Completic			!
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Too Oil/Gas Pay	Tubing Depth
			Depth. Casing Shoe
Perforations			Depti Cash.g bloc
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
7. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a 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
Date First New Oil Hun To Tanks	Date of Test	Froducing Method (Flow, pump, gas l	ift, etc.)
the different	Tubing Pressure	Casing Pressure	Choke Size
Length of Test	. upacy 1 soudant		
Actual Prod. During Test	Oil-Bbis,	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)	Cosing Pressure (Shut-in)	Choke Size
. esting worked (proof once prey			
I. CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION COMMISSION
		APPROVED	
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	e best of my knowledge and belief.	BY	
ELLIOTT PRODUC	TION COMPANY	TITLE	
w. Cn.	M Elevett	This form is to be filed in	compliance with RULE 1104.
(Signature)		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.	
Vice Pre	esident	All sections of this form m	ust be filled out completely for allow
(Title)		able on new and recompleted w	rella.
May 18, 1967	ate)	Fill out only Sections I, well name or number, or transpo	II, III, and VI for changes of owner rter, or other such change of condition

Separate Forms C-104 must be filed for each pool in multiply completed wells.