DISTRIBUTION	NEW MEXICO OL	CONSERVATION COMMISSION	Form (C+1)(4
SANTA FE		T FOR ALLOWABLE	Supersedes Old C-104 and C-
FILE		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS
LAND OFFICE			
TRANSPORTER OIL			
OPERATOR			
	<u> </u>		
Generation OFFICE	Gus Company -	, 	
	tlantic Richfield Company		
Address	ciancie Richfield company		
P 0 Box 171	0, Hobbs, New Mexico 8824	40	
Reason(s) for filing (Check proper			
New Well	Change in Transporter of:	Other (Please explain)	
Recompletion		Change in Operat	
Change in Ownership			- 7 9
	Casinghead Gas Cond	ensate	
If change of ownership give nam and address of previous owner _	e		
_			
- DESCRIPTION OF WELL AN		ane, including Permation	Kind of Lease
S O NE	lt + a c		State, Federal or Fee
	anare d'au	mont lates TRQ	State, rederat er ree State
	150 6.4		l . D.
Unit Letter;;	650 Feet From The East	ine and330 Feet From	The South
1	2/5		
Line of Section	Township 2/S Range	<u>35E</u> , NMPM,	Jea County
Name of Authorized Transporter of	DRTER OF OIL AND NATURAL G	AS	
Name of Authorized . ransporter of	Oil S or Condensate	Address (Give address to which appro	ved copy of this form is to be sent)
Shell Depeling	2 Corporation	POBOD 1910, Mul	land, lexas 7970
Name of Authorized Tansporter of	Casinghead Gas or Dry Gas	Address (Give address to which appro	ved copy of this form is to be sent)
Shillips get	roleum Company	4001 Conbink A	Dessa Texas 7976
If well produces pil or liquids,	Unit Sec. Twp. Age.	is gas actually connected?   Wh	
give location of tanks.	0 12 21 35	1 dear	1 ho benoused
If this production is commission			per craw n
COMPLETION DATA	with that from any other lease or pool	, give commingling order number:	
	Cil Well Cas Well	New Well Workover Deepen	Plug Back Same Resty, Dift. Res
Designate Type of Comple	$etion = (\mathbf{X})$		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	
No Change	Date compt. Ready to Prod.	Total Depth	P.B.T.D.
Pool	Name of Froducing Formation		
	Name of Floadeing Formation	Top Cil/Gas Pay	Tubing Depth
Perforations			
			Depth Casing Shoe
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load oil	
OIL WELL	able for this d	lepth or be for full 24 hours)	una must de equal to or exceed top allo
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)
No Change			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
I			
CAS WELL			
GAS WELL Actual Frod. Test-MCF/D	Longth of Tool		· · · · · · · · · · · · · · · · · · ·
	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
l			
CERTIFICATE OF COMPLIA	ANCE	OIL CONSERVA	TION COMMISSION
			- 1
I hereby certify that the Its a	d gula ion Che Oil Conservation	APPROVED	, 19
Commission have been mplie	d engulation of the Oil Conservation	ley bassis	1
above is true and complete to	the best of my knowledge and belief.		ep (m)
 •••*	N FAINM	TITLE SUPERVISOR	DISTRICT
E/H	P HAM		
M. Shark	marian no		compliance with RULE 1104.
X Jew Mar Mill	DII CONSERVA	If this is a request for allow	vable for a newly drilled or deepen-
J		well, this form must be accompa tests taken on the well in accor	nied by a tabulation of the deviation of
District Prod. & Drl			st be filled out completely for allo
~ ~ ~ ~ ^	(Title)	able on new and recompleted we	• •
3-7-79			and VI only for changes of owne
	(Date)		er, or other such change of condition

	well name or number, or transporter, or other such change of condition.
•	Separate Forms C-10; must be filed for each pool in multiply matrix ${\rm d}$

## RECEIVED

MAR 1 4 1979 OIL CONSERVATION COMM.