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SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
FRANSPORTER	OIL			
	GAS			
OPERATOR				
PRORATION OFFICE				

Engineering Asst.

10-9-81 (Date)

(Title)

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE	REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and (Effective 1-1-65)	
	U.S.G.S.	AUTHORIZATION TO TRAN	AND	DECEIVED	
	LAND OFFICE	AUTHORIZATION TO TRAIN	ISPURT OIL AND NATUR	RAL GAS	
	FRANSPORTER GAS			OCT 2 0 1981	
	OPERATOR		•	O. C. D.	
I.	PRORATION OFFICE			ARTESIA, OFFICE	
	TXO Production Cor	p			
		, Midland, Tx 79701	•	·	
	Reason(s) for filing (Check proper box		Other (Please explain	1)	
	New Well Recompletion	Chan := in Transporter of: Oil Dry Gas		perator Name from	
	Change in Ownership	Casinghead Gus Condens	Texas Off a	Gas Corp. to TXO Corp.	
	If change of ownership give name and address of previous owner				
īľ.	DESCRIPTION OF WELL AND	LEASE		·	
	Lease Name	Well No. Pool Nam	e, Including Formation	Kind of Lease State	
	South Wilson State Com.	1 Wilso	on (Morrow)	State, Federal or Fee	
	1	O Feet From The South Line	andFee:	From The East	
	Line of Section 14 , To	waship 215 Range	34E , NMPM,	Lea Cour	
***	DUCION ATION OF TRANSPOR	TER OF OIL AND NATURAL GAS	·		
111.	Name of Authorized Transporter of Cit	or Condensate X.	Address (Give address to which	h approved copy of this form is to be sent)	
	The Permian Corporation		P. O. Box 1183,	Houston, Texas 77001 h approved copy of this form is to be sent)	
	El Paso Natural Gas		P. O. Box 1384,	Jal, N.M. 88252	
	Phillips Pipeline Compa	nu Unit Sec. Twp. Rge.	Is gas actually connected?	dessa. Texas 79762	
	give location of tanks.	J 14 215 34E	Yes	1-19-79	
		th that from any other lease or pool, a	give commingling order numb	er:	
IV	. COMPLETION DATA	Oil Well Gas Well	New Well Workover Dee	pen Plug Back Same Restv. Diff. R	
	Designate Type of Completi		1	P.B.T.D.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.S.1.D.	
	Pco!	Name of Froducing Formation	Top Oil/Gas Pay	Tubing Depth	
	Periorations			Depth Casing Shoe	
			CEMENTING RECORD DEPTH SET	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE	DEPIRSE	SACKS GEMENT	
	TOTAL AND DEOLUCE I	FOR ALLOWARIE (Test must be a)	fter recovery of total volume of	load oil and must be equal to or exceed top	
١.	OH WELL	able for this de	pen or be for full 24 hours?		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump	o, gas tift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
				Gas - MCF	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gus-wer	
	GAS WELL Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/t.m.tCF	Gravity of Condensate	
	Actual From Four More, D				
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
V	I. CERTIFICATE OF COMPLIA	NCE	OIL CONS	SERVATION COMMISSION	
			APPROVED	22 1981	
	Commission have been complied	regulations of the Oil Conservation with and that the information given	0.5.	Perced By	
above is true and complete to the best of my knowledge and belie			BY Jerry Sexton Dist 1, Sups.		
	\sim		11166		
	Janno Cauco	11	This form is to be f	iled in compliance with RULE 1104.	
	Janna Caudle (Sig	vinature)	" wall this form must be a	for allowable for a newly drilled or dee accompanied by a tabulation of the dev	
	Janna Caudie Sig	, manuse y	tests taken on the well	in accordance with RULE 111.	

All sections of this form must be filled out completely for al able on new and recompleted wells. Fill out Sections I, II, III, and VI only for changes of ow well name or number, or transporter or other such change of condi-

Separate Forms C-104 must be filed for each pool in mul