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U.S.G.S.		Ī	
LAND OFFICE		T	
TRANSPORTER	OIL		
	GAS	Γ	
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISS

Form C-104 110

	FILE	- KEQUES	I FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65		
	U.S.G.S.	ALITHOPIZATION TO TE	AND			
	LAND OFFICE	AUTHORIZATION TO TA	RANSPORT OIL AND NATURAL	GAS		
	TRANSPORTER OIL	7				
	GAS	7				
	OPERATOR					
1.	PRORATION OFFICE					
	Operator	_				
	Cities Service Oil	Company				
	Box 4906 - Midland	Teres 70701				
	Reason(s) for filing (Check proper box					
	New Well	Change in Transporter of:	Other (Please explain)			
	Recompletion	Oil Dry	Connection of	gas transporter.		
	Change in Ownership		lensate			
		out out	iensate			
	If change of ownership give name					
	and address of previous owner					
II.	DESCRIPTION OF WELL AND	LEASE				
	Lease Name	Well No. Pool Name, Including	Formation Kind of Leas	Lease No.		
	Brunson B	7 Drinkard-D	rinkard State, Feder	al or Fee		
	Location					
	Unit Letter N . 623	Feet From The South L	ine and 1990 Feet From	The West		
	Line of Section 3 To	wnship 22\$ Range	37E , NMPM, L	County		
III.	DESIGNATION OF TRANSPOR					
	Name of Authorized Transporter of Other Texas-New Mexico Pi		Address (Give address to which appro			
	Name of Authorized Transporter of Ca		Box 1510 - Midland, Te	Exas 79701		
	Northern Natural G		Address (Give address to which appro			
		Unit Sec. Twp. Rge.	Is gas actually connected? Wh			
	If well produces oil or liquids, give location of tanks.	K 3 228 37E				
	4	, Z 3 , ZZ8 , 3/E	Yes	12-8-72		
11/	If this production is commingled wi	th that from any other lease or pool	, give commingling order number:			
1 V .	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Flug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completic	on = (X)				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
		TUBING, CASING, AN	D CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
		<u> </u>	1	<u> </u>		
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow-					
	OIL WELL Date First New Oil Run To Tanks	Date of Test	epth or be for full 24 hours) Producing Method (Flow, pump, gas li	6 000		
	Date First New Oil Nun 10 I daks	Dute of Test	Producing Method (Piow, pump, gas ti	, e.c.,		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Caudin of Last		ousg 1 1000 ac	5524 5.24		
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF		
	•					
1						
	GAS WELL					
ſ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
İ						
Ī	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI.	CERTIFICATE OF COMPLIANC	Œ	OIL CONSERVA	TION COMMISSION		
	I hereby certify that the rules and re	egulations of the Oil Conservation	APPROVED	70/1977 		
	Commission have been complied w		By Hallian & Vega			
,	above is true and complete to the best of my knowledge and belief.		TITLE OIL & GAS INSPECTOR This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened			
	Efelden !					
(Signature)		twe)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-			
	Ass't. Region Manager					
-	Page-how 20, 1070 (Titl	e)	able on new and recompleted wells.			
	December 20, 1972		Fill out only Sections I. II. III. and VI for changes of owner,			
-	(Dat	e)	well name or number, or transport	er, or other such change of condition.		
			Separate Forms C-104 must be filed for each pool in multiply			

RECEIVED

1 2 2 1072

OLL CONSERVATION COMM. ROBLE, N. M.