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	GAS	
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator SAMEDAN OIL CORPORATION	
Address 2207 Wilco Building	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Boyd	Well No. Pool Name, including Formation 2 Drinkard	Kind of Lease State, Federal or Lease Fee	Lease No.
Location Unit Letter J 1650 Feet From The South Line and 2090 Feet From The East			
Line of Section 23 Township 22-3 Range 37-E Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Texas New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 993, Midland, Texas 79701
If well produces oil or liquids, give location of tanks.	Unit J Sec. 23 Twp. 22-3 Rge. 37-E Is gas actually produced? YES When? 10-31-75

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Deepened <input type="checkbox"/>	EFFECTIVE JANUARY 31, 1977, SKELLY OIL COMPANY MERGED INTO GIFTY OIL COMPANY,	
Date Spudded 10-12-75	Date Compl. Ready to Prod. 10-25-75	Total Depth 7845'	6611'
Elevations (DF, RKB, RT, GR, etc.), 3320' G.L.	Name of Producing Formation Drinkard	Top Oil/Gas Ht. 6294'	Casing Depth 6152'
Perforations 6294' to 6400' (7 holes)		Depth Casing Shoe 7843'	
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE 12 1/4" 8 3/4"	CASING & TUBING SIZE 9 5/8" 4 1/2"	DEPTH SET 1159' 7843'	SACKS CEMENT 400 sx 600 sx

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

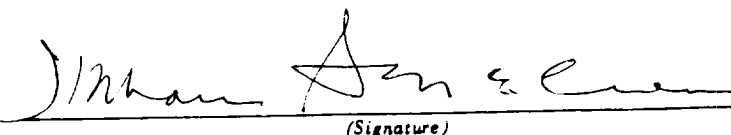
Date First New Oil Run To Tanks 10-30-75	Date of Test 1-12-76	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure --	Casing Pressure 50	Choke Size --
Actual Prod. During Test 19 Bbls.	Oil - Bbls. 11	Water - Bbls. 8	Gas - MCF 168

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate and MCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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 best of my knowledge and belief.


(Signature)

William S. McCuen - Production Superintendent
(Title)

January 19, 1976
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY _____

TITLE _____

This form is to be filed in compliance with RULE 1104.

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.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

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