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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
DOOD ATION OF			

3/17/69

(Date)

## HEW MEXICO OIL CONSERVATION COMMISSIC REQUEST FOR ALLOWABLE

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

	U.S.G.S.  LAND OFFICE  TRANSPORTER  OIL  GAS  OPERATOR	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL G	AS	
Ι.	PRORATION OFFICE Operator	<b>A</b> .			
	Anadardo Production Address				
	Reason(s) for filing (Check proper box)  New Well  Recompletion  Change in Ownership		<b>=</b> !		
	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 Lease				
	E. W. Walden 8 Penrose-Skelly Grayburg State, Federal or Fee Fee				
	Unit Letter <b>K</b> ; <b>1980</b>	Feet From The West Line	e and 2280Feet From T	he <b>south</b>	
	15	22.6			
	Line of Section LJ Tow	riship <b>44 b</b> Range	3/E , NMPM, <b>Lea</b>	County	
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S Address (Give address to which approx	ed copy of this form is to be sent)	
	Shell Pipe Line Comp	Shell Pipe Line Company P. O. Box 19		land, Texas 79701	
	Name of Authorized Transporter of Cas Skelly Oil Company	ringhead Gas 🌇 💮 or Dry Gas 🦳	Address (Give address to which approx	ce. New Mexico 88231	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n ,	
	give location of tanks.	M 15 22 S 37 E		ot available	
IV.	COMPLETION DATA	h that from any other lease or pool,		PLY OIL COMPANY MERCED Plug Book Same Res v. Ding Res v.	
	Designate Type of Completio		X Deepen N.	O GETTY OIL COMPANY.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth 4102	P.B.T.D.	
	1/28/69 Elevations (DF, RKB, RT, GR, etc.)	2/15/69 Name of Producing Formation	Top Cil/Gas Pay	4093 Tubing Depth	
	3397 GR	Grayburg	3772	3880 Depth Casing Shoe	
	3772' - 3910'			4102	
	HOLE SIZE	TUBING, CASING, AND	DEPTH SET	SACKS CEMENT	
	12-1/4"	8-5/8" - 24#	344'	265 sacks-circulared	
	7 <b>-</b> 7/8"	5-1/2" - 14#	4102	500 sacks	
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  (Test must be after recovery of total volumble for this depth or be for full 24 hour				and must be equal to or exceed top allow-	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	t, etc.)	
	3/8/69 Length of Test	3/8/69 Tubing Pressure	Pump Casing Pressure	Choke Size	
	24 hours Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF	
	340 bbls.	65 bbls.	275 bbls.	80	
	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)	Casing Pressure (Shut-in)	Choke Size	
VI	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION	
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.			APPROVED , 19		
			This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepened		
(Signature)  District Superintendent  (Title)			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.