· · · · · · · · · · · · · · · · · · ·	1 00 10001			REQUEST FOR ALLOWABLE	Supersedes Old C-104 and C-1
FILE				AND	Effective 1-1-65
u.s.g.s.				AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
LAND OFFICE			<u> </u>		
	_	4	í		

	FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TRA	AND ANSPORT OIL AND NATURAL (243
	LAND OFFICE	AOTHORIZATION TO THE	THE PROPERTY OF THE PROPERTY O	
	TRANSPORTER OIL			
	GAS		•	·
a	PROTATION OFFICE			
Ě.	Operator			
		ROLEUM CORPORATION		
	Box 1955, Hobbs	s. NM 88240		
	Reason(s) for filing (Check proper box		Other (Please explain)	,
	New Woll	Change in Transporter of:		amazea kaze
	Recompletion	Cil Dry Ga	Change in C	March 1, 1979
	Change in Ownership	Casinghead Gas Conder	asate	
	If change of ownership give name and address of previous owner	Dallas McCasland, Bo	ox 206, Eunice, NM 8823	31
	-			
ĭä.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including F	ormation Kind of Leas	Lease No.
	Closson B	23 Jalmat Yates	Seven Rivers State, Feder	olor Fee Federal 10-0301321
	Location			
	Unit Letter P : 330	Feet From The South Lin	ne and 660 Feet From	The East
	Line of Section 30 To	wnship 22S Range 3	86E , NMPM, Lea	County
হাসাধ	TOTAL A TOTAL A TOTAL A STORY	TER OF OU AND NATURAL GA	s e	
Aià.	Name of Authorized Transporter of Cil	TER OF OIL AND NATURAL GA	Address (Give address to which appro	oved copy of this form is to be sent)
	Gities Service Texas-New Mexic Name of Authorized Transporter of Ca	Company	Tulsa, OK	- T- 70704
			Address (Nive of the s Mintel Top)	
	Ashland Explora		Box 1503, Houston,	TX 77001
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. L 30 22S 36E	yes ;	
	If this production is commingled wi	th that from any other lease or pool,	give commingling order number:	
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completic	on = (X)		
	Date Spudaed	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
	and the state of t			
•	Perforations			Depth Casing Shoe
		THRIDE CASINE AND	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	NOLL SILL			
		OD AVE OUI STATE	/	i and must be equal to or exceed top allow
٧.	TEST DATA AND REQUEST FOIL WELL	OR ALLOWABLE (Test must be a able for this de	pth or be for full 24 hours)	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ifi, etc.)
			Casing Pressure	Choke Size
	Length of Test	Tubing Pressure	Casing Pieasano	
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF
	GAS WELL Actual Prod. Test-MCF/D	Length of Tast	Bbis. Condensate/MMCF	Gravity of Condensate
	Actual Proof (Agricult)			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Sixe
Vi.	CERTIFICATE OF COMPLIAN	CE		ATION COMMISSION
			APPROVED MAK 3	<u> 1979 </u>
	I hereby certify that the sules and Commission have been complied t	regulations of the Oil Conservation with and that the information given the total of my knowledge and belief.		ned by
		. have of my knowladon and helief	BY	

Vi.

above is true and complete to the best of my knowl

Juste Francisco	11-		
(Signature)	7)	
Agent			

(Dute)

· (: ile) March 15, 1979 . This form is to be filed in compliance with RULE 1104.

Grotogist

TITLE .

If this is a request for allowable for a newly delibed 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 rections of this form must be filled out completely for allowable on new and recompleted to leads.

Fill out only Sections I. H. III, and VI for changus of owner, well name or number, or transporter, or other such change of conduct.

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