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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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. OWNER	
Jal Fishing Tool Company	
Address	
c/o Oil Reports & Gas Services, Box 763, Hobbs, New Mexico	
Reason(s) for filing (Check proper box)	
Drill Well	Change in Transporter of:
Drilling activity	Oil
Transportation <input checked="" type="checkbox"/>	Transportation <input type="checkbox"/>
	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner **from Leonard Petroleum, Box 3242, Lubbock, Texas effective 5/1/65.**

II. DESCRIPTION OF WELL AND LEASE

Owner Name	Well No.	Pool Name, including formation	Kind of Lease
H. Whitten	1	Jalmat	State, Federal or Fee Fee
Location			
Unit Letter C	330	Feet From The North Line and 2310	Feet From The West
Section 4	Township 24 S	Range 36 E	Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate	Address (Give address to which approved copy of this form is to be sent)	
Shell Pipe Line Corp.	Box 2648, Houston, Texas	
Name of Authorized Transporter of Crudehead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
None		
If well produces oil or natural gas, give location of tanks	Unit	Sec.
	C	4
	Twp.	Range
	24 S	36 E
	Is gas actually condensed? No	

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)	Old Well	Gas Well	New Well	Work Well	Deepen.	Test Back	Same Restv.	Diff. Restv.
Date of completion	Date Completion to Pool		Total Depth		Cased to			
Depth	Name of Producing Formation		Top of Oil Zone		Bottom Depth			
Perforation					Depth casing shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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 flow - (month, day, year)	Date of Test	Producing Method (if flow, pump, gas lift, etc.)	
Length of Test	Testing Pressure	Casing Pressure	Stroke Size
Actual Production (bbls)	Oil-Water	Water-Prod.	Gas-MCF

GAS WELL

Actual Production (bbls)	Length of Test	Bbls. Condensate MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Testing Pressure	Casing Pressure	Stroke 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.

H. L. Smith
(Signature)

Agent
(Title)

June 9, 1965
(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 Sections I, II, III, and VI only 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.