DISTRIBUTION							
SANTA FE	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-104				
FILE	REQUES	REQUEST FOR ALLOWABLE Supersedes Old C-104 and					
U.S.G.S.		AND FEH 2	Effective 1-1-65				
LAND OFFICE		RANSPORT OIL AND NATUR	ALGAS				
OIL	Crig&2dc: OCC Hobba		M '66				
IRANSPORTER GAS		Office					
OPERATOR	cc: file						
PRORATION OFFICE	SINCLAS						
Operator	SINCLAIR OIL CORPORATI	ONFinelair Off Carporation M					
Address	Dil & Gas Company	into Atlantic Richfield Compa difective March 4 1969	B Y				
P. C. Box	1920, Hobbs, New Mexico	MARCELIVE MARCE & 1903					
Reason(s) for filing (Check proper	box)	Other (Please explain)				
New Wel	Change in Transporter of:						
itecom _{pl} etion	Oil Dry C	Gas					
Change in Ownership	Casinghead Gas Cond	ensate					
It change of ownership give nam	ne		_				
and address of previous owner _							
DESCRIPTION OF WELL AN							
E. L. Steeler /		ame, Including Formation	Kind of Lease				
Location	WN 3	Jalmat (Yates)	State, Federal or Fee Fee				
linit Letter L	1980 Feet From The South	640					
•••••• Letter i i i	Feet From The Douth Li	ine and <u>OOU</u> Feet F	From The West				
Line of Section 19	Township 23S Range	37Е , ммрм,	Lea Count				
			Lea Count				
DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL G.						
Name of Authorized Transporter of	Sil or Condensate	Address (Give address to which a	approved copy of this form is to be sent)				
Name of Authorized Transporter of	/						
Ll Paso Natural Gas			approved copy of this form is to be sent)				
-	Unit Sec. Twp. Rge.	Jal, New Mexico					
.: we a produces oil or liquids, tive location of tanks.	i i i i i	Is gas actually connected? Yes	When 2-16-66				
							
OMPLETION DATA	with that from any other lease or pool,	give commingling order number:					
	Oil Well Gas Well	New Well Workover Deepe	n Plug Back Same Res'v, Diff. Re				
Designate Type of Comple	etion = (X) (X)						
Date Spudded	Date Compl. Ready to Prod.	Total Depth	(X) (X) P.B.T.D.				
	2-9-66	35581	3440'				
	Name of Producing Formation	Top Oil, Gas Pay	Tubing Depth				
Jalmat	Yates	2874 '	2830'				
ertorations 2874-2889-209	6-2901-2931-2957-2986-299	7-3005-3014-3026-3035-	Depth Casing Shoe				
3040-3061-3149-3159-	51/2-3180		35581				
		D CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
	8-5/8"OD	1182'	450				
	5-1/2"OD	3558!	500				
	2-3/8"CD	2830!					
EST DATA AND DECHEST		· · · · · · · · · · · · · · · · · · ·					
LSI DATA AND REQUEST	FOR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load epth or be for full 24 hours)	oil and must be equal to or exceed top all				
ate Plast New OII Run To Tanks	Date of Test	Producing Method (Flow, pump, go	15 lift. etc.)				
engt of Test	Tubing Pressure	Casing Pressure	Choke Size				
rtual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF				
AS WELL							
	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate				
2078 (CACF 7400 MC		0	0				
Back Pr.	Tubing Pressure	Casing Pressure	Choke Size				
	405#	Pkr.	22/64"				
ERTIFICATE OF COMPLIA	NUE	OIL CONSER	VATION COMMISSION				
araby co-tife the table t	4	APPROVED	~				
hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		APPROVED	, 19				
		Fr					
		A star and a star and a star and a star a					
1/1.		TITLE					
+ / / / /)	This form is to be filed	in compliance with RULE 1104.				
state free (Si	inature l	If this is a request for al	llowable for a newly drilled or deepen				
(Signature) Superintendent (Title) 2-18-66 (Date)		 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 able 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 					
					- -		
					1	completed wells.	nust be filed for each pool in multip