		1					
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	DISTRIBUTION		ONSERVATION COMMISS	Form C - 104			
	SANTAFE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C- Effective 1-1-65			
	FILE	1	AND Hij				
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NAT	URAL GAS 🤄 🙉 🕻, 🕻,			
	TRANSPORTER OIL CAS						
	OIL		, , ,	10 4 52 PM 'G7			
	TRANSPORTER GAS			111 07			
				·			
	OPERATOR	•					
I.	PRORATION OFFICE	<u> </u>					
	Operator MDYACO To a						
	TEXACO Inc.						
	Address						
	P. O. Box 728 - Hobbs, New Mexico						
	Reason(s) for filing (Check proper box) Other (Please explain)						
	reason(s) for thing (check proper day)						
	New Well						
	Recompletion	OII Dry Ga	= 1				
	Change in Ownership	Casinghead Gas Conder	sate				
	If change of ownership give name and address of previous owner						
II.	DESCRIPTION OF WELL AND	LEASE					
	Lease Name	Well No. Pool Na	ne, Including Formation	Kind of Lease			
	W. H. Rhodes	'b" NCT-1 14 Rho	des	State, Federal or Fee			
	Location		40.				
		Wost	1 08∩	og From The North			
	Unit Letter E; 864	Feet From The West Lin	e and 1980 F	eet From The NOTUN			
	Line of Section 26 , Tov	wnship 26 - S Range 3	7-E , NMPM,	Lea Count			
HI.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	.s				
	Name of Authorized Transporter of Oil	X or Condensate	Address (Give address to wh	tich approved copy of this form is to be sent)			
	Texas-New Mexico Pipe Line Company P. O. Box 1510 - Midland, Texas						
	Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent)						
	i e		P. O. Box 1384 - Jal, New Mexico				
	El Paso Natural Gas C		P. O. Box 1304	- Jal, New Mexico			
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?				
	give location of tanks.	I 27 26-S 37-E	YES	January 24, 1967			
		th that from any other lease or pool,	give commingling order nur	mber: NONE			
		in that from any other lease of poot,	give comminging order nam	NO.L			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover D	Deepen Plug Back Same Res'v. Diff. Res			
	Designate Type of Completic	- (Y)	1 1	NEW NEW NEW NEW			
		0110	NEW NEW	NEW NEW NEW NEW			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth				
	December 23, 1966	February 16, 1967	3295 1	3270'			
	Pool	Name of Producing Formation	Top Oil/XXX Pay	Tubing Depth			
	Rhodes	Yates-Seven Rivers	31601	3145*			
	Perforations	1 2000		Depth Casing Shoe			
		ne Jet SPF 3160' to 3176	37.891 to 37.991, and 32.951				
	Perforate 42" Casing or			3237' to 3240'.			
			CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	9 7/8"	7 5/8"	1200!	600 Sx.			
	6 3/4"), 7/2"	32951	և75 Sx.			
		4 2/-					
`.			1				
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of	of load oil and must be equal to or exceed top al			
	OIL WELL	able for this a	epth or be for full 24 hours)	1:6.			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pu	imp, gas tift, etc.)			
	February 1, 1967	February 16, 1967	Pump				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
		Pump	65	Pump			
	24 Hours		Water-Bbls.	Gas-MCF			
	Actual Prod. During Test	Oil-Bbls.	NONE	526.7			
	20	20	HONE				
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Tubing Pressure	Casing Pressure	Choke Size			
	i esting Method (pitot, back pr.)	I doing resoure					

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.

Dan Gillett

Assistant District Superintendent

(Title)

February 16, 1967

(Date)

OIL CONSERVATION COMMISSION

APPROVED	, 19		
		* 4 * * * * * * * * * * * * * * * * * *	
BY			

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

TITLE

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.