-	HO, OF COPIES RECEIVED I	•							
	DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND							
:	SANTA FE								
	FILE								
	U.S.G.S.	AUTHO	RIZATIO	N TO TR	ANSPORT O	III AND N	ATURAL	GAS	
:	LAND OFFICE				, , , , , , , , , , , , , , , , , , , ,		MONAL	UAU	
پ	TRANSPORTER OIL	• •							
1	OPERATOR								
	PHORATION OFFICE	``. 							
	Operator						1		
	IMPERIAL - AMERICAN N	IANAGEMENT	COMPAN	Υ					
- 1	Address								
	507 Midland Savings Bldg. Midland, Texas								
	Reason(s) for filing (Check proper box) New Well Change in Transporter of:								
1	New Well	Oil Change in	1 transport	Dry C					
- 1	Recompletion	Casinghe	-4 Ca= H	•	ensate				
١	Change in Ownership X	Casingno	14 Gas []						
	DESCRIPTION OF WELL AND	SOLAR OI	Pool Name		Box 5596		land, T		
	•						State, Fede	ral or	
	E.C. Hill "C"		Teague	Blinel	ry	1			
:		330_Feet Fro	m The	lestL	Ine and 23	310	_ Feet Froi	m The	
	Line of Section 27 To	wnship 23	-S	Range	37-E	, NMPM,	Le	а	
	THE LOW LETTON OF THE SNEEDE	TED OF OU	AND NA	TUDAI G	.AS				
۱.	DESIGNATION OF TRANSPOR Name of Authorized Transporter of OL	or C	ondensate		Address (Gi	ve address t	o which app	roved	
i						10 M	idland,	Tex	
	Shell Fipeline Company Box 1910 Midland, 123 Name of Authorized Transporter of Casinghead Gas of Dty Gas Address (Give address to which approved								
	71 To							Tex	
	Unit Sec. Twp. Rge.					Is gas actually connected? When			
	. If well produces oil or liquids, give location of tanks.	K 27 23-S 37-E Yes							
	If this production is commingled w	ith that from ar	ny other le	ase or poo	l, give commin	igling order	number:		
ŕ.	COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	P	
	Designate Type of Completi			 			<u> </u>	F	
	Date Spuaded	Date Compl. I	Ready to Pr	oa.	Total Depth	1			

Name of Producing Formation

Date of Test

Oil-Bble.

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.

(Signature)

(Date)

Tubing Pressure

Length of Test

Tubing Pressure (Shuk-in)

CASING & TUBING SIZE

Elevations (DF, RKB, RT, GR, etc.)

HOLE SIZE

Date First New Oil Run To Tanks

TEST DATA AND REQUEST FOR ALLOWABLE

Perforations

OIL WELL

Length of Test

GAS WELL

Actual Prod. During Test

Actual Prod. Test-MCF/D

Testing Method (pitot, back pr.)

vi. Certificate of compliance

Area Manager

October 24, 1969

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-85

exas Lease No. dse eral or Fee Fee om The South County proved copy of this form is to be sent) Texas
proved copy of this form is to be sent) Texas Same Res'v. Diff. Res'v. Plug Back P.B.T.D. Tubing Depth Top Oll/Gas Pay Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET (Test must be after recovery of total volume of load oil and must be equal to or exceed top allows able for this depth or be for full 24 hours) Producing Method (Flow, pump, gas lift, etc.) Choke Size Casing Pressure Gas-MCF Water - Bble. Gravity of Condensate Bbls. Condensate/MMCF Choke Size Cosing Pressure (Shut-in) OIL CON PERVATION 1989 SSION RYISOR DISTRI TITLE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despended 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 sllow-able 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