1.	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS OPERATOR PRORATION OFFICE Cperdior	REQUES	CONSERVATION COMMISSION T FOR ALLOWABLE AND RANSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65
	New Well Recompletion Change in Cwnership If change of ownership give name	Change in Transporter of: Oil Dry Conditions	Other (Please explain)	·
	and address of previous owner			·
•••	Lease Name Isbell, J. L. Location Unit Letter A ; 41	Well No. Pool Name, Including 6 Jal-Mat Yate	Seven Rivers State, Federa	al or Fee Fee
	Line of Section 15 T	ownship 24S Range	36E , NMPM, Le	ea County
III.	DESIGNATION OF TRANSPORM Name of Authorized Transporter of C Permian Corporati Name of Authorized Transporter of C	on Permian (Eff. 9 / 1787)	AS SCURLOCK PERMIAN CORP E Address (Give address to which appro Box 1183, Houston, Te Address (Give address to which appro	ved copy of this form is to be sent) exas 77001
	El Paso Natural G	as Company	Box 1492, El Paso, Tex	(as
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Fige. A 15 24 36	Is gas actually connected? Who	10-24-78
iv.	COMPLETION DATA	oith that from any other lease or pool,	give commingling order number: New Well Workover Deepen	
	Designate Type of Complet	ion – (X) X	X	Plug Back Same Resty. Diff. Resty.
	7-24-78	Date Compl. Ready to Prod. $10-24-78$	Total Depth 3552!	P.B.T.D. 3513
	Elevations (DF, RKB, RT, GR, etc.) 3382.6	Name of Producing Formation Seven Rivers	Top Oil/Gas Pay 3220	Tubing Depth 33901
	Perforations 3220, 26, 30, 6 one each dept	6,70,74,78,3322,26,30, th 0.40" DML select-fire	34,80,86,90,94,98	Depth Casing Shoe 3518'
		TUBING, CASING, AN	D CEMENTING RECORD	3310
}	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET 1348'	SACKS CEMENT 500 sx.
į	7 7/8	5 1/2	3518'	250 sx.
	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this de	fier recovery of total volume of load oil or pih or be for full 24 hours)	and must be equal to or exceed top allow-
Ī	Date First New Oil Run To Tanks 10-23-78	Date of Test 11-15-78	Producing Method (Flow, pump, gas lif Pump	t, etc.)
	Length of Test	Tubing Pressure	Cosing Pressure	Choke Size
-	Actual Prod. During Test	Oil-Bbls.	20 Water-Bbis.	3/4 ¹¹
_		8	24	546
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	CERTIFICATE OF COMPLIAN		OIL CONSERVA	TION COMMISSION
C	ommission have been complied a	regulations of the Oil Conservation with and that the information given a best of my knowledge and belief.	BY STREET STATE	, 19
		1	THE SUPERVISOR	DISTRICT

Operator

16 November 1978/

(Date)

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.

Fitl out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

DISTRIBUTION	1 - 1 - 1								lses.	1000 11 12	•
SANTA FE		κ ^{,,,,,,} , ω	ב צוכח ח	ווו כטא	SERVATIO	т соям		~ .			of Lease
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LAND OFFICE											
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IG. TYPE OF WELL									7. Unit	ydroeuwn 7777 777	it Kaine
	OIL WELL	TO CAS	7								
b. TYPE OF COMPLE		X write		DRY	OTHER_			···	E. Farm	or Lease	· Name
MEN NO		PLUG BACK	DIF	F.	OTHE R				J. L	. Isbe	ell
2. Name of C; erator	JEEPEN L			***					9. Well 1	No.	
О. Н. Ве	rrsr									6	
3. Address of Operator	.11 y								10. Fiel	d and Po	ol, or silderal of A
188 One N	Marienfeld Pi	lace. Midl	land. '	Texas	79701				Jal-M	fat Ya	ites Seven Ry
4. Location of Well	Wallemera 1	1000, 17110		1 0114 5					11111	TITT	777777 X777
UNIT LETTER A	418	ece + 50	ou the D	Vorth		351		EET FROM			
UNIT LETTER	LOCATED	722174	OM 14E		TITTE	TITT	ITTI	VIIII	12. Cour	91	7777777777
Es at	15	. 24S RGE	36E						Lea	L	
THE East LINE OF	16. Date T.D. Read			nnem		LLLLL Devation	3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.	XXXXXX KB, RT. G	.,		. LINN NANA ANA . Cashinghead
7-24-78	9-9-78	1	24-78	•			82.6				•
20. Total Depth	21. Flug E			f Multiple	e Compl., Ho	w 23.	Intervals	s "Retar			able Tools
3552	351			.tany			Drilled l	s Ectar By 1348	-3552	į	0-1348
24. Producing Intervails			Name					7 ,73 10			as Directional Survey
		, , ,									ade No
3220 -	3398 Yates										110
26. Type Electric and C	ther Loas Run								2	_i 7. Was We	ell Cored
	ay - Neutron										No
28.	ay - Neurron		NG RECO	RD (Rea	ort all strings	set in w	vell)				
CASING SIZE	WEIGHT LB./F	I · · · · · · · · · · · · · · · · ·			E SIZE	327111		TING REC			AMOUNT PULLED
	20#	134			2 3/411			00 sx			0
8 5/8					7 7/8"	· · · ·		50 sx			0
5 1/2	14#	351	0.		1 1 7 0		<i>L</i> ,	70 3A			
								-			
20	1.150	ER RECORD	!			30.		т	UBING R	ECORD	
29.	TOP	BOTTOM	SACKS CI	EMENT	SCREEN		SIZE		PTH SET		PACKER SET
3126		BOTTOM	37013 01		JONECH		2 3/8		90		None
								+			1,0110
31. Perforation Record	Unterval size and no	unbert			32.	<u> </u>	HOT ER	ACTURE,	CEMENT	SOUEEZ	7F FIC.
	30,66.70,74					INTERV					ATERIAL USED
	30, 34, 80, 86		!		3220						E,5 gal
				^	3220	33,0					-11, 250 #
one each	depth 0.40"	DML sere	ct-III	e							s gelled KCL
								NUL, water	& 20	00 gar	bs. 20-40 sar
33.				PRODI	L UCTION		L	water	2 20	<u> </u>	
Date First Froduction	Producti	on Method (Flow	ing, gas li			d type pi	<u>итр)</u>		Well S	tatus (Pre	od. or Shut-in)
10-23-78	Dum	ping 12' x	1 1/2"	Rod	Pumn					rod.	
Date of Test	Hours Tested	Choke Size	Prod'n.	For	Oil – Bbl.	Ga	s - MCF	Wate	r – Bbl.		s - Cil Ratio
11-15-78	24	3/4"	Test Pe		8		546	- 1	24	1	,250:1
Flow Tubing Fress.	Casing Pressure	Calculated 24-	Oil – Bi	<u> </u>	Gas - 1	ICF		er – Bbl.			rity - API (Corr.)
Pumping	20	How Hate	8		546			24		35	
34. Disposition of Gas (J	vented, etc.)	.!						l Witness		
											27.7
35. List of Attachments	to El Paso	ivatural Ga	15						O. H.	per	<u>т у</u>
LOG											
36. I hereby certify that		wn on both sides	s of this fo	rm is tru	e and comple	te to the	best of n	ny knowled	ge and he	lief.	
. , , , , , , , , , , , , , , , , , , ,	1 6		/		• • •		-			•	
Mit	C. 18	- and		/	Operator	•				16 NI~	wambar 1070
SIGNED	1 1 1		_ TIT	LE(Sheraro.				DATE_	TO 140	vember 1978
		//									

20 days after the completion of any new s-diffled or can on the well and a summary of all special tests confirmationally drilled wells, true vertical say the shall no. The form is to be filed in guintuplicate except on

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APPICAL SECTION OF STATE

Northwestern New Mexico

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