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

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110

	FILE	_	AND	Effective 1-	1-65			
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NA	ATURAL GAS				
	LAND OFFICE							
	TRANSPORTER OIL							
	GAS							
	OPERATOR							
ı.	PRORATION OFFICE	1						
	Operator Operator	I CODDODATION						
	ODESSA NATURAL CORPORATION							
	P. O. Box 3908, Odessa, Texas 79760							
	l	·	100.00	,				
	Reason(s) for filing (Check proper box) Other (Please explain)							
	New Well	Change in Transporter of:						
	Recompletion Change in Ownership X	Oil Dry Go Casinghead Gas Conder	7					
	Change in Ownership	Casingheda Gas Conde	iisute					
	If change of ownership give name	Odessa Natural Gasolir	ne Co P O Rox	3008 Odessa Texas	79760			
	and address of previous owner	Odessa Naturar Gasorri	10 GO., 1. O. DOX	5500, ode53a, rexas	73700			
	DESCRIPTION OF HELL AND	T E ACE						
11.	Legse Name	Well No. Pool Name, Including F	'ormation K	(ind of Lease	Lease No.			
			i .	itate, Federal or Fee	_			
	Location	Carroll /3811 1 Bustis das-dioritetta			<u> </u>			
		50 Feet From The North Lir	. 1650	Feet From The West				
	Unit Letter;1C	Feet From The NOTER Lir	ne and	Feet From The 11030				
	Line of Section 13 To	wnship 25-S Range	37-E , NMPM,	Lea	County			
	Line of Section 13 Tor	wnship 25-5 Range	37-L , 14101F101,	<u> </u>	County			
***	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	46					
III.	Name of Authorized Transporter of Oil		Address (Give address to	which approved copy of this form i	s to be sent)			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				•			
	Name of Authorized Transporter of Car	singhead Gas or Dry Gas XX	Address (Give address to	which approved copy of this form i	s to be sent)			
	El Paso Natural G		Justice Gasoline Plant, Jal, New Mexico					
	 	Unit Sec. Twp. Rge.	Is gas actually connected					
	If well produces oil or liquids, give location of tanks.	F 13 25S 37E	Yes	May 3, 1963	2			
	<u> </u>	<u> </u>						
		th that from any other lease or pool,	give commingling order n	number:				
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen Plug Back Same F	Res'v. Diff. Res'v.			
	Designate Type of Completic	on - (X)		X	1			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
	1-30-62	3-23-62	4860	4860				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
	are versions (21, mas, m, on, etc.)	Glorietta	4700	4635				
	Perforations	Giorietta	1 4700	Depth Casing Shoe				
	Petrotations							
	4700-4760 4780-4810 TUBING, CASING, AND CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		EMENT			
	15	10 3/4	890	490				
	6 3/4	4 1/2	4860	525	-			
	0 3/4	2 3/8	4635	343				
		2 3/8	4033					
	The state of the s	OD ALLOWARY E		of load all and much be sound to a				
٧.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)							
	Date First New Oil Run To Tanks	I ACLI						
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size				
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF				
	GAS WELL							
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condense	ite			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-1	n) Choke Size				
VI	ERTIFICATE OF COMPLIANCE		OIL CC	NSERVATION COMMISSI	ON			
• • •			O. I GOING CONTROL GOING					
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given			APPROVED NOV 3 0 1970 , 19					
				1				
	above is true and complete to the	best of my knowledge and belief.	BY					
			TITLE SUPERVISOR DETRICES 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					
	Dogadi J. (Sign	Money J						
	· Hogher M	" January N						
	(Signo Horace L. Conger - P		tests taken on the we	oll in accordance with RULE 1	111.			
	norace L. Conger - P	roduction roreman	11	In farm much be filled out com	stately for allow-			

(Title)

(Date)

November 23, 1970

All sections of this form must be filled out completely for allowable 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 completed wells.

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1 2 1970

OIL CONSERVATION COMM. HOBBS, N. IA.