NO. OF COPIES RECEIVED				
DISTRIBUTION				
SANTA FE				
FILE				
υ. s .g.s.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR				
		1		

NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE		ONSERVATION COMMISSIC Form C-104 FOR ALL OWARLE Supersedes Old C-104 and C-110		
FILE	J KEWUESI F	FOR ALLOWABLE AND		Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL GAS		
LAND OFFICE				
TRANSPORTER GAS				
PRORATION OFFICE	4			
Operator				
Oil Development Co	mpany of Texas			
P. O. Box 12058	Amaril1	lo, Texas 7910)1	
Reason(s) for filing (Check proper box New Well Recompletion	Change in Transporter of: Oil Dry Gas	22 No.1	in lease nam to the Carl	e from Carlson A- son A well
Change in Ownership	Castnghead Gas Condens	sale number	1.	
f change of ownership give name and address of previous owner				
DESCRIPTION OF WELL AND Lease Name	Well No.; Pool Name, including ro		Kind of Lease	Lease No.
Carlson A	l Langlie Mat	tix (Queen)	State, Federal or Fee	
	South Line	990 gnd	_ Feet From The	East
Line of Section 22 To	wnship 25S Range 3	7E , NMEM,	Lea	County
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GAS	S Address (Give address to	which approved cop	y of this form is to be sent)
Shell Oil Company Name of Authorized Transporter of Ca	<u></u>	P. O. Box 2032	9, Houston, 7	TX 77025 y of this form is to be sent)
ElPaso Natural Gas	Company	P. O. Box 1492	, ElPaso, Tex	
If well produces oil or liquids, give location of tanks.	P 22 25S 37E	Yes	1	N/A
If this production is commingled wi	th that from any other lease or pool, a			Back Same Res'v. Diff. Res'v.
Designate Type of Completion	$\begin{array}{c c} \text{Cil Weil} & \text{Gas Well} \\ \text{on } -(X) & \end{array}$	New Well Workover	Deepen Frag	Joseph James 1100 VI
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.	r.D.
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Gil/Gas Pay	Tubir	ng Depth
Perforations			Depth	h Casing Shoe
		CENTURING BECOR	<u></u>	
	TUBING, CASING, AND	DEPTH SE		SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	50717100		
		1		
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ter recovery of lotal volu	ne of load oil and mu	st be equal to or exceed top allow-
OIL WELL	4016 70. 1118 31	pth or be for full 24 hours Producing Method (Flow	nump. sas lift, etc.)
Date First New Oil Run To Tanks	Date of Test	Figure 1		
Length of Test	Tubing Pressure	Casing Pressure	Chok	e Size
Actual Prod. During Test	Oil-Bbis.	Water - Bble.	Gas	-MCF
		1		
GAS WELL	The state of Table	Bbis, Condensate/MMC	Grav	rity of Condensate
Actual Prod. Test-MCF/D	Length of Test			te Size
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut		
CERTIFICATE OF COMPLIAN	iCE		CONSERVATION	
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED		Orig. D. Jack b. 9
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Jerry Sexton		
		Till 1º Boh.		
\wedge \wedge		TITLE		lance with must extend
10	o la_	This form is to	 be filed in compli- uest for allowable 	iance with RULE 1104. for a newly drilled or despende

Julio &	. Welken	
<i>b</i> ((Signature)	
Petroleum Er	gineer	

(Date)

(Title)

8-8-77

well, this form must be accompanied by a tabulation of t 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 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

REGENTED

7.00 - 1977

OIL CONSERVATION COMM. HOBBS, N. M.

	NO. OF COPIES RECEIVED				
	DISTRIBUTION SANTA FE FILE		CONSERVATION COM ION	Form C-104 Supersedes Old C	C-104 and
	U.S.G.S.	ALITHODIZATION TO TO	AND	Effective 1-1-65	
	LAND OFFICE	_ AUTHORIZATION TO TR	PANSPORT OIL AND NATURAL	L GAS	
	TRANSPORTER OIL GAS	-			
	OPERATOR				
1	PRORATION OFFICE				
	Oil Development C	company of Texas			
		Bank Bldg, P. O. Box 12	2058, Amarillo, Tx79101		· · · · · · · · · · · · · · · · · · ·
	Reason(s) for filing (Check proper bo		Other (Please explain)		
	Recompletion	Change in Transporter of: Oil Dry G			
	Change in Ownership XX		ensate .		
	If change of ownership give name and address of previous owner	Westates Petroleum Com	mpany, 817 W. 7th. Los	Angeles, Calif. 90	017
. II	. DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including I	Formation Kind of Le		
	Carlson A-22	1 _ 1	this 7 Diagram	eral or Fee Fed.	Lease 1 A-22
	Location		oldie, Faci	eldi di ree i Cu.	A-22
	Unit Letter P ; 33	O Feet From The South Li	ne and 990 Feet Fro	m The <u>East</u>	
	Line of Section 22 To	waship 25S Range	37E , NMPM,	Lea	Cour
111	. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS Address (Give address to which app	proved copy of this form is to b	
	Shell Oil Company	721	P. O. Box 20329, He		e sent,
	Name of Authorized Transporter of Ca	singhead Gas XX or Dry Gas	Address (Give address to which app	proved copy of this form is to b	e sent)
	El Paso Natural G	as Company	P. O. Box 1492, E1 I	Paso, Tx 79978	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connected? Yes	When NA	
IV	If this production is commingled wi . COMPLETION DATA	th that from any other lease or pool,	give commingling order number:		•
	Designate Type of Completic	On - (X)	New Well Workover Deepen	Plug Back Same Res'v.	Diff. Re
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	<u>.</u>
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	,. <u>.</u> .
	Perforations	1		Depth Casing Shoe	······································
		TUBING, CASING, AN	D CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMEN	٧T
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
v	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of sotal volume of load o	il and must be equal to or ever	end ton a
• •	OIL WELL	able for this de	epth or be for full 24 hours)	-	10p di
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas - MCF	•
	CACWELL	<u></u>			
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI.	CERTIFICATE OF COMPLIANO	CE '	11	ATION COMMISSION	
I hereby certify that the rules and regu Commission have been complied with		ith and that the information given	APPROVEDOrig. S	igned by	
	above is true and complete to the best of my knowledge and belief		BY	exton	
A		TITLE Dist A, Supv.			

VI.

Petroleum Engineer

Feb. 16, 1977

(Title)

(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 allow 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