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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
		,	

NEW MEXICO OIL CONSERVATION COMMISS.

Form C-104

SANTA FE	REQUEST	FOR ALLOWABLE Supersedes Old C-104 a			
FILE		AND Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TR	PANSPORT OIL AND NATURAL	. GAS		
LAND OFFICE					
TRANSPORTER OIL					
GAS					
OPERATOR					
I. PRORATION OFFICE Operator					
'	JRAL CORPORATION				
Address					
P. O. Box 3	3908, Odessa, Texas 79760)			
Reason(s) for filing (Check proper		Other (Please explain)			
New Well	Change in Transporter of:				
Recompletion	Oil Dry C	Gas 🔲			
Change in Ownership X	Casinghead Gas Cond	ensate			
If change of ownership give name and address of previous owner	e Odessa Natural Gasolin	ne Co., P. O. Box 3908,	Odessa, Texas 79760		
and address of previous owner _					
II. DESCRIPTION OF WELL AN	ND LEASE				
Lease Name	Well No. Pool Name, Including				
Carlson Federal	1 Justice Gas	- Glorietta XXXXX Fede	eral XXXXXX		
Location					
Unit Letter P	990 Feet From The South L	ine and 660 Feet From	n The East		
Line of Section 23	Township 25-S Range	37-E , ммрм, Le	a County		
II. DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL G	AS			
Name of Authorized Transporter of	Oil or Condensate	Address (Give address to which app	roved copy of this form is to be sent)		
None					
Name of Authorized Transporter of	Casinghead Gas or Dry Gas		Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Ga			Justice Gasoline Plant, Jal, New Mexico		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When			
give location of tanks.		Yes April 23, 1962			
If this production is commingled	with that from any other lease or pool	, give commingling order number:			
V. COMPLETION DATA					
Designate Type of Comple	etion - (X) Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
Designate Type of Compre			X		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
3-17-62	5-8-62	4877	4835		
Elevations (DF, RKB, RT, GR, etc.		Top Oil/Gas Pay	Tubing Depth		
3085 DF	Glorietta	4660	4660		
Perforations			Depth Casing Shoe		
			4876		
		O CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
15	10-3/4	872	490		
8 3/4	7	2614	180		
6 3/4	4 1/2	4876	405		
	2 3/8	4660			
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load o lepth or be for full 24 hours)	il and must be equal to or exceed top allow		
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)		
Date First New Oil Run 10 I daks	Date of Test	Producting the time (1 tom) Pampy Sun	14-1		
	Tubing Pressure	Casing Pressure	Choke Size		
Length of Test	I doug Pleasure	Carrie 1 1000 au	5.0325 5.25		
	Oil-Bhis.	Water - Bbls.	Gas-MCF		
Actual Prod. During Test	Oli-Bbis.	174101 - 22151			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate		
Actual Prod. 1881 - MCF/D	Long. Os 1 dec	The state of the s	Gravity or Condensation		
Transport of the back of the b	Tubing Descript & Short San	Casing Pressure (Shut-in)	Choke Size		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Costud Liesante (Sunc.Tu.)	CHORD SIZE		
		1			
I. CERTIFICATE OF COMPLIA	ANCE		ATION COMMISSION		
		(_)_ NOV 3-0	19/1		
I hereby certify that the rules as	nd regulations of the Oil Conservation	APPROVED	, 18		
Commission have been complied above is true and complete to	d with and that the information given the best of my knowledge and belief.	BY DISTRICE			
Total In tide and complete to					
,		TITLE SUPERVISOR D			
~ 1	· //	This form is to be filed in	compliance with RULE 1104.		
一次人为这位。这	(Souges	If this is a request for all	nwable for a newly drilled or deepened		
(S	ignature)	mall this form must be accome	ranied by a tabulation of the deviation		
Horace I Conger -	Production Foreman	tests taken on the well in acc	ordance with RULE III.		

(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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