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DISTRIBUTION SANTA FE	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C -104
FILE	REQUES	F FOR ALLOWABLE OFFICE O,	Supersedes Old C-104 and C-116 Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TE	AND CHARLES ON THE	9, <b>6</b> ,
LAND OFFICE	- Orighton OCC Hob	RANSPORT OIL AND NATURAL bs, New Mex 2 3 25 PM	_ GAS ' era
TRANSPORTER OIL	cc: Regional	Office	<b>'b</b> B
GAS	cc: file		
OPERATOR  PRORATION OF E		,	
Operator	Sin	elair Oil Corporation Morgad	
SI. SI.		Atlantic Richfield Company	
Address		ective March 4, 1969	
	, Hobbs, New Mexi∞ 882	40 .	
Reason(s) for illing (Check proper b		Other (Please explain)	
New Wel:	Change in Transporter of:		
Change in Ownership	Oil Dry C	<b>=</b> 1	
		ensate	
If change of ownership give name	Marie Commence	Mathing 16 d.	The the last
and address of previous owner	<del></del>		- Jan V
I. DESCRIPTION OF WELL AN	D LEASE		
Lease Name	1 . 1	ame, Including Formation	Kind of Lease
Wimberly WN		stis Fusselman	State, Federal or Fee Fee
Unit Letter :	O Nonth	223.0	
Unit Letter ; //	Feet From The North Li	ne and 2310 Feet From	m The West
Line of Section 44	Ownship 25S Range	37E NMPM	Lea
	Truige	, NMPM,	Lea County
. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	AS	
Name of Authorized Transporter of C	or Condensate	Address (Give address to which app	roved copy of this form is to be sent)
Texas New Texas Pir	eline Company	P. O. Box 1510, Midla	and, Texas 79701 roved copy of this form is to be sent)
Name of Authorized Transporter of C		1	1
El Paso i caral Gas	Unit Sec. Twp. Rge.	Jal, New Mexico 8825	The state of the s
If well produces on or requide, give location of tarks.	D 24 25S 37E	, , ,	When
If this production is commingled a	with that from any other lease or pool,	Yes	7-20-68
. COMPLETION DATA		give comminging order number:	PC-263
Designate Type of Complet	ion - (X) Oil Well Gas Well $(X)$	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.
_	Date Compl. Ready to Prod.	Total Depth	(X)
Date Spudded Cammenced	7-19-68	8210!	P.B.T.D. 67201
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3077.6' GR	Justis Fusselman	66471	6620'
Perforations 6647-48-51-54-63-681			Depth Casing Shoe
0047-46-31-34-03-681			80851
UOL 5 6175	TUBING, CASING, ANI	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	9-5/8"OD	5321 33761	350
8-3/4"	7"OD	80851	2363
	2-3/8"OD	66201 Jus Fuss	
TEST DATA AND REQUEST I	FOR ALLOWABLE A Pest must be a	fter recovery of total volume of load oil	l and must be equal to or exceed top allow-
OIL WELL Date First New Oil Run To Tanks	able for this de		
7-19-68	7-20-68	Producing Method (Flow, pump, gas l Flow	ift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Sta
24 hrs.	10-40#	Sealed	Choke Size
Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas-MCF
60 bbls.	60 bbls.	0 bbls.	56
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, cack pr.)	Tubing Pressure	Casina Dacassa	
The state of the s	4 . * AGDUTA	Casing Pressure	Choke Size
CERTIFICATE OF COMPLIAN	CF	,	
LIAN COMMENT			ATION COMMISSION
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED JUL	24 1968 19
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		0.11	lon II was
		BY John iv. Junyan	
		TITLE Cologist	
711			compliance with RULE 1104.
-lill to			compliance with RULE 1104.  wable for a newly drilled or deepened
(Signature)		well, this form must be accompa	nied by a tabulation of the deviation
Superint endent		tests taken on the well in accor	rdance with RULE 111.

III.

V.

V.

(Signature) Superintendent

(Date)

(Title) July 22, 1968

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.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Separate Forms C-104 must be filed for each pool in multiply completed wells.