ļ	NO. OF COPIES RECEIVED	4					
	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMM	ISSION	Form C-104		
	SANTA FE	REQUEST	FOR ALLOWABLE			Supersedes Old C-104 and C-116	
	FILE		AND		Effective 1-1-6	55	
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND I	NATURAL GAS			
	LAND OFFICE	A THORIZATION TO TRA	THE STATE OF	WITCHINE ON			
	OIL	-					
	TRANSPORTER	┪					
	GAS	4					
	OPERATOR	4					
1.	PRORATION OFFICE			 			
	Operator THE TOTAL COMPANY THE						
	TEXAS PACIFIC OIL COMPANY, INC.						
	Address						
		P. O. Box 1069, Hobbs, New Mexico 88240					
	Reason(s) for filing (Check proper box) Other (Please explain)						
	New Well Change in Transporter of:						
	Recompletion	mpletion Oil Dry Gas X					
	Change in Ownership Casinghead Gas Condensate						
	Change in Ownership					<u>-</u>	
	If change of ownership give name						
	and address of previous owner						
II.	DESCRIPTION OF WELL AND	LEASE		· · · · · · · · · · · · · · · · · · ·			
	Lease Name	Well No. Pool Name, Including Fo	ormation	Kind of Lease		Lease No.	
	Legal	1 Jalmat Yates G	as	State, Federal or F	ee Fee	NMJ-585	
	Location						
		O South	ue and 660		East		
	Unit Letter P; 66	Feet From The South Lin	ie and	Feet From The	Mage		
					•	Q. A	
	Line of Section 31 To	wnship 25-S Range	37-E , NMPN	l,	Lea	County	
III.	DESIGNATION OF TRANSPOR'	TER OF OIL AND NATURAL GA	IS				
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address	to which approved co	py of this form is	to be sent)	
i	1						
	Name of Authorized Transporter of Ca	Address (Give address	to which approved co	opy of this form is	to be sent)		
	El Paso Natural Gas Co		2007 Wilco But	lding, Midla	ind, Texas 7	9701	
		Unit Sec. Twp. Rge.	Is gas actually connect				
	If well produces oil or liquids,	July 1	no	,	approval		
	give location of tanks.	<u>i </u>			. upprovez		
	If this production is commingled with that from any other lease or pool, give commingling order number:						
	COMPLETION DATA						
		Oil Well Gas Well	New Well Workover	Deepen Plu	ig Back Same Re:	s'v. Diii. Hes'v.	
	Designate Type of Completic	on - (X)	. X	1	X	!	
	Date s(Satisti	Date Compl. Ready to Prod.	Total Depth	P.E	3.T.D.		
	3-8-71	3-13-71	32541		3060°		
		Name of Producing Formation	Top Oil/Gas Pay	Tuk	ping Depth		
	Elevations (DF, RKB, RT, GR, etc.)	•	·		3000'		
	2994' GR	Yates Gas	2766 - 3015'		oth Casing Shoe		
		- 88 - 97 - 2804- 19- 24			-		
	73- 79- 2883- 88- 2904- 12- 19- 29- 40- 51- 57- 62- 71- 77- 85- 91- 3133'						
	3006 - 15° TUBING, CASING, AN		CEMENTING RECORD				
	HOLE SIZE CASING & TUBING SIZE		DEPTH SET		SACKS CE	MENT	
	10-3/4"	8-5/8**	298		150		
	7-7/8"	5-1/2"	3133		400		
	7-778	2-7/8"	3000				
		2-1/6	3000				
			<u> </u>				
V.	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-						
٠.	ON WELL able for this depth or be for full 24 hours)						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	x, pump, gas lift, etc	··)		
	Length of Test	Tubing Pressure	Casing Pressure	Cho	oke Size		
	Leudin or rear	,					
		Oil-Bbls.	Water - Bbls.	Gar	s-MCF		
	Actual Prod. During Test	Oli-Bbis.	114(0) 22(0)				
			<u> </u>				
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	F Gre	avity of Condensate	•	
	882 MCF/D	24	none		Dry		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shu	c-in) Che	oke Size		
	1	(BANG- 200)					
	Bristol Prover		- 				
VI.	. CERTIFICATE OF COMPLIANCE		OIL	CONSERVATIO	N COMMISSIC	N	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			~JUL 16	−13/1		
			APPROVED	() 0 0 0 0		, 19	
			\\//\	XXXX	7.0		
			BY	THE THE	יוטיי דרוויין -		
			#//SUPEE	CYNCE D'S	RRICT I		
			TITLE				
	Original Signed by		This form is t	o be filed in comp	liance with RUL	E 1104.	
	Sheldon Ward		To ship in a co	west for sllowable	for a newly dril	led or deepened	
	(Signature)			at he accompanied	by a tabulation	Of the designion	
			tests taken on the	well in accordance	SE WITH RULE 11	11.	
	Area Superintendent	All sections of this form must be filled out completely for allow-					

(Title)

(Date)

March 15, 1971

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.

Reclinit III

MAS 1 1071

OIL CONSERVATION COMM.