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TRANSPORTER	OIL	L_			
	GAS				
OPERATOR					
PRORATION OFFICE					

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

		+	ACTIONIZATION TO TWA	7.7	5.	
LAND OFFICE		\sqcup				
TRANSPORTER -	OIL	_				
	GAS					
OPERATOR						
PRORATION OFFI	CE					
Operator			د کشتر بنا و مستند			
			SEELLY OUL			
Address						
			P. O. Box 730 - Hobi			
Reason(s) for filing (C	heck prope	r box)		Other (Please explain)		
New Well	닉		Change in Transporter of:		operator effective	
Recompletion	_		Oil Dry Ga	=		
Change in Ownership			Casinghead Gas Conden	isate []		
If change of ownersh: and address of previous	ip give na ous owner	me 	Fermerly Phillips Petro	<u>loum Company's - Mettix</u>	Well No. 8	
. DESCRIPTION OF	WELL A	ND I	LEASE	Bartlesville, Chlahene	se Lease No.	
Lease Name			Well No. Pool Name, Including F			
Mettix "A"	- Bet	t. 1	l 8 Longlio Matti	State Feder	al or Fee State B-9974	
Location			-			
Unit Letter	;	64	Feet From The South Lin	ie and 1986 Feet From	The	
Our Ferrer						
Line of Section	2	Tov	wnship 248 Range	, NMPM,	County	
DESIGNATION OF	TRANSI	PORT	TER OF OIL AND NATURAL GA	IS		
Name of Authorized T	ransporter	of Oil	or Condensate	Address (Give address to which appr		
Texas-How	Mozdee	Pi	pe Line Confuny	Box 1510 - Midland, T		
			singhead Gas or Dry Gas	Address (Give address to which appr	oved copy of this form is to be sent)	
Hone - Get			_	****		
			Unit Sec. Twp. Rge.	Is gas actually connected?	hen	
If well produces oil or give location of tanks			H 2 248 37E			
L				give commingling order number		
		ed wit	th that from any other lease or pool,	Erve comminging order number.		
. COMPLETION DA			Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
Designate Type	e of Comp	pletio	on — (X)			
Date Spudded			Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB,	RT GR 4	etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	,, σπ, ε					
Perforations					Depth Casing Shoe	
Periorditons						
			TUBING CASING AN	D CEMENTING RECORD		
			CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
HOLE	SIZE		CASING & LUBING SIZE	1 22		
				+		
			<u> </u>			
. TEST DATA AND	REQUE	ST F	OR 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 allou	
OIL WELL			dote for this d	Producing Method (Flow, pump, gas	lift, etc.)	
Date First New Oil F	Run To Tanl	k 5	Date of Test	Producting Manner (1 som) hamps Rea		
				Contra Pressure	Choke Size	
Length of Test			Tubing Pressure	Casing Pressure	3	
					Gas - MCF	
Actual Prod. During	Test		Oil-Bbis.	Water - Bbls.	GGS-MCF	
1						
·						
GAS WELL						
Actual Prod. Test-N	ACF/D		Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Testing Method (pita	t, back pr.	,	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	

VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

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.

(signed) C. R. DAVIS

(Signature)

strict Deperiates

(Title)

Hovember 9, 1967

(Date)

OIL CONSERVATION COMMISSION

1967 7161 COS975 ENGINEER DISTRICT No. 1 TITLE .

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 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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	GAS			
OPERATOR				
PRORATION OF	ICE			

H.

III.

IV.

May 4, 1965

(Date)

DISTRIBUTION			
SANTA FE		CONSERVATION COMMISSIUN FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-1
FILE	KEQUEST	AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL G	AS
LAND OFFICE			
TRANSPORTER GAS			
OPERATOR			
PRORATION OFFICE			
Operator			
Phillips Petr	oleum Company		
	D3.4		
Reason(s) for filing (Check proper	Bldg Odessa, Texas	Other (Please explain)	
New Well	Change in Transporter of:	Change of well :	number and name
Recompletion	Oil Dry Go		
Change in Ownership	Casinghead Gas Conde		
If change of ownership give name	e		
and address of previous owner	(Formerly Phillips Pet)	roleum Co. New Mex "E" We	11 No. 2)
DESCRIPTION OF WELL AN	ID LEASE		
Lease Name		me, Including Formation	Kind of Lease
Location Mattix	8	Langlie Mattix	State, Federal or Fee State
Unit Letter N; 6	60 Feet From The south Lir	ne and 1980 Feet From Th	ne west
Line of Section	Township 2LS Range	37E , NMPM,	Tan County
		3 (B) 1334 (G	Lea County
DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL GA		
Name of Authorized Transporter of	•	Address (Give address to which approve	d copy of this form is to be sent)
Texas New Mexico Pip Name of Authorized Transporter of	e Line Company Casinghead Gas or Dry Gas	Box 1510 - Midland, Te Address (Give address to which approve	d conv of this form is to be sent
(TSTM)	en Di, Gas	Address (Give address to which approve	a copy of this form is to be sent)
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When	
give location of tanks.	M 2 24S 37E	No (TSTM)	
f 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	
Designate Type of Comple	tion = (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Fool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			
: Grordons			Depth Casing Shoe
	TUBING CASING AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST	EOD ALLOWADLE (T.		
OIL WELL		fter recovery of total volume of load oil an pth or be for full 24 hours)	d must be equal to or exceed top allow
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-Bbls.	Water-Bbls.	Gas-MCF
•			GGS - MO1
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Chaka Ciaa
2 11 amon but)	1	Casing I reasure	Choke Size
ERTIFICATE OF COMPLIA	NCE	OIL CONSERVAT	ION COMMISSION
hereby certify that the rules and regulations of the Oil Conservation		APPROVED 1913	, 19
ommission have been complied bove is true and complete to t	with and that the information given he best of my knowledge and belief.	BY	
	, mar	TITLE	
who I and		This form is to be filed in com	npliance with RULE 1104.
In Impe	W. J. Mueller		ole for a newly drilled or deepened
(54)	;marure)	well, this form must be accompanied tests taken on the well in accordance.	
Reservoir Enginee	riela)		be filled out completely for allow-

able on new and recompleted wells.

Fill out Sections I, II, III, and VI only 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.