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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

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

U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	_ GAS
I RANSPORTER OIL	Sinclair Oil Corporation Merge	d	
GAS OPERATOR	Atlantic Richitica	D.Y.	
PRORATION OFFICE	effective March 4, 2707		
Sinelair Oil	SINCLAR OF CORPOR	ATION	
	O, Hobbs, New Mexico,		
Reason(s) for filing (Check proper box)		Other (Please explain)	
Jew Well	Change in Transporter of:	340	
Recompletion	Oil Dry C	ensate ensate	
Change in Ownership	Casingneda Gus Cond		
change of ownership give name nd address of previous owner			
ESCRIPTION OF WELL AND	LEASE Well No. Pool :	Name, Including Formation	Kind of Lease State, Federal or Fee
Jim Camp WN	2	Jalmat Gas	State, Federal or Fee FOO
ocation	n Nawkh	. 660 Fact Fr	West
Unit Letter; 198	Feet From The North	ine andFeet Fr	om The
Line of Section 6 . To	wnship 248 Range	37E , NMPM,	Los Coun
Line of Section , Tot	withship		
ESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL (GAS	pproved copy of this form is to be sent)
Name of Authorized Transporter of Oil	or Condensate		
Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which a	pproved copy of this form is to be sent)
Name of Authorized Transporter of Cu		Jal, New Mexico	
	Unit Sec. Twp. Age.	Is gas actually connected?	When
If well produces oil or liquids, give location of tanks.		Yes	June 28, 1965
	th that from any other lease or poo	ol, give commingling order number:	
COMPLETION DATA			- Diff B
Designate Type of Completi	on - (X) Gas Well	111011	X
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date Spudded 8-14-54	4-11-65	3575'	33621
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth 3223
Jalmat Gas	value yates	2721	Depth Casing Shoe
Perforations			34501
2944-32341	TUDING CASING	AND CEMENTING RECORD	
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
HOLE SIZE	12-3/4"	301	25
118	8-5/8*	1180	400
7-7/8"	5-1/2"	34501	300
	2-3/8"	32231	
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must	be after recovery of total volume of loc is depth or be for full 24 hours)	ad oil and must be equal to or exceed top
OIL WELL	Date of Test	Producing Method (Flow, pump,	gas lift, etc.)
Date First New Oil Run To Tanks	Date of Test		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
The state of the s	Oil-Bbls.	Water-Bbls.	Gas-MCF
Actual Prod. During Test			
-			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1212	24 Hrs.	0	Chaka Siga
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size 20/64*
		OIL CONSE	ERVATION COMMISSION
. CERTIFICATE OF COMPLIA	NICE		
I handy contify that the miles an	d regulations of the Oil Conserva	tion APPROVED	, 19
			Ithrey
above is true and complete to	the best of my knowledge and bel		
() (-	\searrow	TITYE	The same of the same
	7	This form is to be fil	ed in compliance with RULE 1104.

Superint endent

April 12, 1965

(Date)

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 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.