

DISTRIBUTION		5
AMTAFE		1
FILE		1
S.G.S.		1
AND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		
PRORATION OFFICE		1

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-105
Effective 1-1-65

RECEIVED

AUG 19 1974

Operator		DAVID FASKEN		O. C. C. ARTESIA, OFFICE	
Address		608 First National Bank Building, Midland, Texas 79701			
Reason(s) for filing (Check proper box)					
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:			
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Dry Gas	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	Condensate	<input type="checkbox"/>
Other (Please explain)					
If change of ownership give name and address of previous owner					

II. DESCRIPTION OF WELL AND LEASE

Lease Name	State "32"	Well No.	1	Pool Name, including Formation	Indian Basin Morrow	Kind of Lease	State, Federal or Fee	State	Lease No.	L-4757
Location										
Unit Letter	D	1000	Feet From The	North	Line and	1000	Feet From The	West		
Line of Section	32	Township	20-South	Range	25-East	NMPM,	Eddy	County		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Navajo Crude Oil Purchasing Co.		Address (Give address to which approved copy of this form is to be sent)		Box 175 Artesia, New Mexico 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Natural Gas Pipe Line Co of America		Address (Give address to which approved copy of this form is to be sent)		Box 283 Houston, Texas 77002	
If well produces oil or liquids, give location of tanks.	Unit	D	Sec.	32	Twp.	20-S
			Rge.	25-E	Is gas actually connected?	Yes
					When	8-14-74

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X	X					
Date Spudded	12-22-73	Date Compl. Ready to Prod.	3-15-74	Total Depth	9700'	P.B.T.D.	9662'		
Elevations (DF, RKB, RT, GR, etc.)	3622' GR	Name of Producing Formation	Morrow	Top Oil/Gas Pay	9321'	Tubing Depth	9079'		
Perforations	9321-31 9347-53, 9399-9418 9454-88 9547-58						Depth Casing Shoe	9646	
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17-1/2"	13-3/8" 61#		209' 200 sxs. Lite, 100 sxs. "C" circulated						
12-1/4"	8-5/8" 24# & 32#		3242' 1000 sx Lite, 25 sx "C", 4 yd Ready-Mix						
8-5/8"	4-1/2" 11.60#		9696' 700 sxs. "C"						
	2-7/8"		9079' Packer @ 9079'						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

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-Ebls.	Water-Ebls.	Gcs-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Ebls. Condensate/MMCF	Gravity of Condensate
C.A.O.F. 22,300	2 Hours		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	2970		Various

VI. CERTIFICATE OF COMPLIANCE

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.

S. L. Parks

(Signature)

Agent

(Title)

August 16, 1974

(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 30 1974

BY W. A. Gressett

TITLE OIL AND GAS INSPECTOR

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.