NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
MAY 28 1979
O. C. C.
ARTESIA, OFFICE

Form C-104
Effective 1-1-65

NATURAL RESOURCES COMPANY

Box 3000 Midland, Texas 79702

Reason for Filing (Check proper box)

Change in Transporter of:

Oil ☐ Dry Gas ☐

Casinghead Gas ☐ Condensate ☐

Other (Please explain)

NAME CHANGE ONLY

Previous Operator

Sohio Petroleum Company

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
State 1-19 Comm.	1	McMillan Morrow Gas	State, Federal or Fee State

Unit Letter F, 1650 Feet From The North Line and 1650 Feet From The West

Section 19 Township 20S Range 27E, NMPM, Eddy

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate XX — Address (Give address to which approved copy of this form is to be sent)

Scurlock Oil Company — 1501 Houston Club Bldg., Houston, Texas

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas XX — Address (Give address to which approved copy of this form is to be sent)

Phillips Petroleum Company — 4001 Penbrook, Odessa, Texas

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	19	20S	27E	Yes	NA 3-26-69

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

Designate Type of Completion – (X)	Oil Well	Gas Well	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.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 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-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

District Superintendent

May 22, 1979

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 29 1979

W. A. Gressett

SUPERVISOR, DISTRICT II

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, it 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.

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.