

NEW MEXICO OIL CONSERVATION COMMISSION  
**REQUEST FOR ALLOWABLE  
 AND  
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**  
**RECEIVED**

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

JUN 21 1973

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I. Operator  
**MONSANTO COMPANY**  **O. C. C.**  
 Address **ARTESIA, OFFICE**  
**101 North Marienfeld, Midland, Texas 79701**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well  Change in Transporter of:  
 Recompletion  Oil  Dry Gas   
 Change in Ownership  Casinghead Gas  Condensate

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

*R-4622 8-29-73  
 Burton Flat - Atoka Gas*

Lease Name <b>MILLER FEDERAL</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>BURTON FLAT - ATOKA</b>	Kind of Lease State, Federal or Fee <b>Federal</b>	Lease No. <b>NM 7068</b>
Location				
Unit Letter <b>G</b>	<b>1600</b>	Feet From The <b>North</b>	Line and <b>1980</b>	Feet From The <b>East</b>
Line of Section <b>3</b>	Township <b>21 South</b>	Range <b>27 East</b>	<b>NMPM, Eddy County</b>	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <b>THE PERMIAN CORPORATION</b>	Address (Give address to which approved copy of this form is to be sent) <b>BOX 3119, MIDLAND, TEXAS 79701</b>			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <b>SOUTHERN UNION GAS CO. TRANSWESTERN PIPELINE CO.</b>	Address (Give address to which approved copy of this form is to be sent) <b>FIDELITY UNION TOWER, DALLAS, TEXAS 75201 P.O. BOX 2521, HOUSTON, TEXAS 77001</b>			
If well produces oil or liquids, give location of tanks.	Unit <b>G</b>	Sec. <b>3</b>	Twp. <b>21S</b>	Rge. <b>27E</b>
Is gas actually connected?		When <i>8-15-73 7-25-73 TLO July, 1973</i>		

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 <b>2/26/73</b>	Date Compl. Ready to Prod. <b>5/1/73</b>	Total Depth <b>11,510'</b>		P.B.T.D. <b>11,470'</b>				
Elevations (DF, RKB, RT, GR, etc.) <b>3200' RKB</b>	Name of Producing Formation <b>ATOKA</b>	Top Oil/Gas Pay <b>11,304'</b>		Tubing Depth <b>11,126'</b>				
Perforations <b>10,658-10,668</b>						Depth Casing Shoe <b>11,510'</b>		
<b>TUBING, CASING, AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<b>17 1/2"</b>	<b>13 3/8"</b>		<b>603'</b>		<b>750</b>			
<b>12 1/4"</b>	<b>9 5/8"</b>		<b>2788'</b>		<b>1250</b>			
<b>8 1/2"</b>	<b>5 1/2"</b>		<b>11,510'</b>		<b>550</b>			
	<b>2 1/2" Tubing</b>		<b>11,126'</b>					

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 - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL *27615 acms NSP- 922*

Actual Prod. Test-MCF/D <b>2714</b>	Length of Test <b>1 Hr.</b>	Bbls. Condensate/MMCF <b>6.8</b>	Gravity of Condensate <b>50.8°</b>
Testing Method (pitot, back pr.) <b>BACK PRESSURE</b>	Tubing Pressure (shut-in) <b>3680 (Morrow)</b>	Casing Pressure (shut-in) <b>3872 (Atoka)</b>	Choke Size <b>14/64"</b>

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.

*A. W. Wood*  
 (Signature) **A. W. Wood**  
 District Production Manager  
 (Title)  
 June 20, 1973  
 (Date)

OIL CONSERVATION COMMISSION  
**AUG 17 1973**  
 APPROVED  
 BY *W. A. Gussert*  
**OIL AND GAS INSPECTOR**  
 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.