

DISTRIBUTION	5
ANTA FE	1
ILE	1
S.G.S.	✓
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS 1
OPERATOR	1
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
 Effective 1-1-65

RECEIVED

JUN 2 1974

I. Operator
 Champlin Petroleum Company ✓
 Address
 701 Wilco Building, Midland, Texas 74701
 Reason(s) for filing (Check proper box)
 New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

O. C. C.
 ARTESIA, OFFICE

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

R-5162 3-1-74
 East Carlsbad Strawn Gas

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Pecos-Federal	1	Undesignated-Strawn	State, Federal or Fee Federal	NM-15870
Location				
Unit Letter	660	Feet From The	North	Line and
			1980	Feet From The
			West	
Line of Section	1	Township	22-S	Range
			27-E	
				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"/>	Address (Give address to which approved copy of this form is to be sent)					
The Permian Corporation	Box 1183, Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	Box 1492, El Paso, Texas 79999					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twsp.	Rge.	Is gas actually connected?	When
	C	1	22-S	27-E	yes	6-21-74

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	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
12-22-74	3-22-74	12,100	11,910					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3109' DF	Strawn	10,580	11,204					
Perforations	Depth Casing Shoe							
Strawn 10,580-10,608	12,098							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8"	452	450					
12-1/4"	9-5/8"	2615	1400					
8-3/4"	7"	11,397	550					
6	5" liner	11,193-12,098	105					

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

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1,733	4 hours	22	54.7°
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Back Pressure	3610 (Strawn)	3883 (Marrow)	Orifice Meter

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.

Walter M. ...
 (Signature)

District Clerk

(Title)

June 20, 1974

(Date)

OIL CONSERVATION COMMISSION
 JUN 26 1974

APPROVED _____, 19

BY *W. A. Grossett*

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 Form C-104 must be filed for each well in multiple.