

SANTA FE	/	
FILE	/	✓
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
OPERATOR		/
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION ON
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

JAN 26 1978

I. Operator
DELTA DRILLING COMPANY ✓ **O.C.C.**
ARRESIA, OFFICE
Address
P. O. Box 866, Odessa, TX 79760
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change In Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change In Ownership ☐

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name South Culebra Bluff	Well No. 1	Pool Name, Including Formation Wildcat Atoka	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>East</u> Line of Section <u>23</u> Township <u>23S</u> Range <u>28E</u> , NMPM, <u>Eddy</u> 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, TX 79701	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, TX 79978	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 23
	Twp. 23S	Rge. 28E
	Is gas actually connected? yes	When 1-26-78

If this production is commingled with that from any other lease or pool, give commingling order number: No

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX	XX					
Date Spudded 11-6-77	Date Compl. Ready to Prod.		Total Depth 11,769		P.B.T.D. 11,769			
Elevations (DF, RKB, RT, GR, etc.) 2995.5 GR	Name of Producing Formation Atoka		Top Oil/Gas Pay 11,750		Tubing Depth 11,769			
Perforations Open Hole					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
Conductor	20"		34		5 cu.yd. Ready-Mix			
17 1/2"	13-3/8"		418		500 sk. Class "C"			
12 1/4"	9-5/8" 36" & 40"		6355		Stage #1 1065 sk.			
					Stage #2 1640 sk.			

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 45 MMCF/D	Length of Test 2 hours	Bbls. Condensate/MMCF Trace	Gravity of Condensate 73.4 API
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) Not Available	Casing Pressure (shut-in) Not Available	Choke Size

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.

W. M. Greenwell, Jr.
(Signature)
Manager of Production
(Title)
January 26, 1978
(Date)

OIL CONSERVATION COMMISSION
JAN 31 1978
APPROVED W. A. Gressett, 19____
BY
TITLE 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, 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.