

DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION		Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
SANTA FE		REQUEST FOR ALLOWABLE			
FILE		AND			
U.S.G.S.		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE					
TRANSPORTER	OIL				
	GAS				
OPERATOR					
PRORATION OFFICE					
Operator		Alpha Twenty-One Production Company		RECEIVED DEC 20 1979	
Address		2100 First National Bank Building, Midland, Texas 79701		O. C. D.	
Reason(s) for filing (Check proper box)		Other (Please explain)		ARTESIA, OFFICE	
New Well	<input type="checkbox"/>	Change in Transporter of:			
Recompletion	<input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>			
Change in Ownership	<input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>			
If change of ownership give name and address of previous owner		Black River Corporation, 2100 First National Bank Building Midland, Texas 79701			
DESCRIPTION OF WELL AND LEASE					
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.	
Miller Com.	1	Cass Draw Wolfcamp	State, Federal or Fee	Fee	
Location					
Unit Letter	C	760 Feet From The	North	Line and	2080 Feet From The
Line of Section	10	Township	23-S	Range	27-E
			NMPM,	Eddy	County
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)			
Navajo Crude Oil Purchasing Co.		81 Freeman Ave Artesia N.M. 88210			
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 79978			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When
	C	10	23S	27E	Yes 10-10-78
If this production is commingled with that from any other lease or pool, give commingling order number:					
COMPLETION DATA					
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover
			X		
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	
05-22-78	10-10-78	12,350		11,160	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth	
3101.7 Ground level	Wolfcamp	9,896		9,545	
Perforations		Depth Casing Shoe			
9896 - 9906; 9924 - 9932, 2 shots per foot					
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT	
17-1/2"	13-3/8"	349'		400	
12-1/4"	10-3/4"	5635'		1660 & 300 sx neat	
9-1/2"	7-5/8" liner	5410 to 11,497'		770	
6-1/2"	5" liner	11,367 to 12,349'		150	
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.)			
		Pested ID 3 12-28-79			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
			12-28-79		
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 (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)		Choke Size	
CERTIFICATE OF COMPLIANCE			OIL CONSERVATION COMMISSION		
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.			APPROVED DEC 26 1979, 19		
Tommy Phipps (Signature)			BY W. A. Gussert		
Executive Vice President (Title)			TITLE SUPERVISOR, DISTRICT II		
December 17, 1979 (Date)			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.		