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LAND OFFICE	
TRANSPORTER	OIL
	GAS
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

I.

Operator Petroleum Associates, Inc.	
Address 520 Commercial Bank Bldg., Midland, Texas	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Florance D	Well No. 8	Pool Name, Including Formation Ballard Pictured Cliffs	Kind of Lease State, Federal or Fee Indian	Lease No. 362
Location				
Unit Letter A ; 790' Feet From The North Line and 790' Feet From The East				
Line of Section 8 Township 23N Range 4W , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
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		
If well produces oil or liquids, give location of tanks. No tank	Unit	Sec.	Twp.	Rge.
Is gas actually connected?		When		
No				

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 10/25/66	Date Compl. Ready to Prod. 10/31/66	Total Depth 2750'		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.) 7053.0 GR	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 2670 - 2686		Tubing Depth 2737'			
Perforations 2670 - 2686 2 shots per foot					Depth Casing Shoe None			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
9-7/8"	7-5/8"		101'		60 sacks			
6-3/4"	4-1/2"		2737'		100 sacks			
	1-1/4" tubing		2669'					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Pumpjack, 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 1036 AOF	Length of Test 3 hr	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) 1 point BP test	Tubing Pressure (shut-in) 691 psig	Casing Pressure (shut-in) 691 psig	Choke Size .750

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.

Orig. signed by: **F.J. Ray**
(Signature)
Agent
(Title)
December 14, 1966
(Date)

OIL CONSERVATION COMMISSION
APPROVED **DEC 30 1966**, 19
BY **Original Signed by Emery C. Arnold**
TITLE **SUPERVISOR DIST. 3**

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.

