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FILE				
U.S.G.S.		<u> </u>		
LAND OFFICE		<u>L</u> _		
TRANSPORTER	OIL	<u> </u>		
	G A S	/_	<u> </u>	
OPERATOR			<u> </u>	
PRORATION OFFICE		<u></u>	<u> </u>	
Operator	_			
00	dess	a N	atu	

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

FILE		AND		
U.S.G.S.	AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GA	S	
LAND OFFICE				
TRANSPORTER OIL				
OPERATOR GAS				
PRORATION OFFICE				
Operator				
Odessa Natur	cal Corporation			
P.O. Box 390	08 Odessa, Texas 7976	Other (Please explain)	trojek	
Reason(s) for filing (Check proper box)		Other (Please explain)		
New Well	Change in Transporter of: Oil Dry Gas			
Recompletion	Casinghead Gas Condensa	nte 🔲		
Change in Ownership				
If change of ownership give name and address of previous owner				
	FASE		Tigarilla Legse No.	
Jicarilla Joint	Well Mg. Pool Italie, meranis	State Federal	Jicarilla Legse No. or Fee Apache	
Venture "PC"	103 Ballard Pictu		arilla Joint Venture	
Location	o. Nombh		he_East	
Unit Letter B; 790	O' Feet From The North Line	and 1000 reet From 1	ne	
Line of Section 10 Town	nship 23N Range 3W	, NMPM, Rio A	rriba County	
	OF ON AND NATURAL CAS			
Name of Authorized Transporter of Oil	ER OF OIL AND NATURAL GAS	Address (Give address to which approv	ed copy of this form is to be sent)	
No.	i		and some of this form is to be sent)	
Name of Authorized Transporter of Cast	inghead Gas or Dry Gas X	Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural G		P.O. Box 990 Farmington, NM 87401		
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	is gas actually commonter.		
give location of tanks.		NO	OTTRITOWN	
If this production is commingled wit	h that from any other lease or pool, g		Det Desta Diff Best	
V. COMPLETION DATA	On well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Completion		X	P.B.T.D.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth 3194 '	3143'	
6-23-78	6-30-78 Name of Producing Formation	3194 Top Oil/Gas Pay	Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.)	1	2984!	2987'	
7169' KB	Pictured Cliffs	<u> </u>	Depth Casing Shoe	
Perforations				
	TUBING, CASING, AND		SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	125	
12 1/4	8 5/8	3181'	190	
7 7/8	7 7/8	3.10		
	1 1/4	2987'	<u> </u>	
V. TEST DATA AND REQUEST F	OD AT TOWART E (Test must be at	fter recovery of total volume of load oil	and must be squal to or exceed top allow	
OIL WELL	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas l	3 5 7 8 1.3 KM	
Date First New Oil Run To Tanks	Date of Test	Plotted in the second		
	Tubing Pressure	Casing Pressure	Choke Size	
Length of Test			JUL 2 4 1978	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gan-MCECON, COM.	
		1	DIST. 3	
GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
3°241, Prod 1 T-6'94°CAOF- 3,921	3 hours		Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	1	
Back Pressure	950 Psig	950 Psig	ATION COMMISSION	
VI. CERTIFICATE OF COMPLIAN	NCE	OIL CONSERV	19 <u>(19 3)</u> 19	
		APPROVED	, 19	
I hereby certify that the rules and regulations of the Oil Conservation		y A. R. Vendrick		
above is true and complete to the	he best of my knowledge and belief.	en employment in terms on the		
For: Odessa Natura	l Corporation	TITLE SUPERVISOR LAST. 42. This form is to be filed in compliance with RULE 1104.		
	Mall.			
MININI	WY	If this is a request for allowable for a newly drilled or deepen		
	gnature)	II ALLAS AS THE WEIL IN SCUULGEBOOD WATER IN THE		
Ewell N. Walsh, P	E President	All sections of this form	must be filled out completely for allowells.	
Walch Engineering Production Corp.			w vit and UT for changes of OWII	
7-19-78 (Date)		Fill out only Sections I. II. III. and such change of conditions well name or number, or transporten or other such change of conditions. Separate Forms C-104 must be filed for each pool in multip		
		Separate Forms C-104 m	men per mind for each boot in mand	
	0	if combiging series		