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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



Operator DON C. WILEY and FLUID POWER PUMP COMPANY	
Address 1116 Bank of New Mexico Building, Albuquerque, New Mexico 87101	
Reason(s) for filing (Check proper box)	Other (Please explain)
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 type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal Media	Well No. 1	Pool Name, Including Formation Media Pool, Entrada Sandstone	Kind of Lease Federal State, Federal or Fee	Lease No. NM 036122
Location				
Unit Letter M	990	Feet From The South	Line and 660	Feet From The West
Line of Section 14	Township 19 North	Range 3 West	, NMPM, Sandoval 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)					
Permian Corporation	Farmington, New Mexico 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
None						
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 14	Twp. 19N	Rge. 3W	Is gas actually connected? No	When None

If this production is commingled with that from any other lease or pool, give commingling order number: **Not commingled**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded March 20, 1969	Date Compl. Ready to Prod. April 16, 1969		Total Depth 5312'		P.B.T.D. 5299'			
Elevations (DF, RKB, RT, GR, etc.) 6837 Gk	Name of Producing Formation Entrada Sandstone		Top Oil/Gas Pay 5249'		Tubing Depth 5245'			
Perforations 5252' - 5258' 6' with 3 half inch holes per foot					Depth Casing Shoe 5310'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		200'		150 sbs Class A, Circulated			
7-7/8"	4-1/2"		5310'		300 sbs Class C, Circulated			
	2-3/8"		5245'		to 1600', test w/2000'			

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 April 16, 1969	Date of Test April 16, 1969	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 10 hours	Tubing Pressure 30 lbs	Casing Pressure 125 lbs	Choke Size 2"
Actual Prod. During Test 330 bbls	Oil-Bbls. 330 bbls	Water-Bbls. TSM	Gas-MCF TSM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	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.

(Signature)
VAL R. REESE, GEOLOGIST

May 6, 1969

(Title)

(Date)

OIL CONSERVATION COMMISSION
MAY 7 1969

APPROVED
Original Signed by Emery C. Arnold

BY
SUPERVISOR DIST. #3

TITLE

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.