

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR INFORMATIONForm C-104  
Supersedes Old C-104 and C-105  
Effective 1-1-65

## AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

SANTA FE

FILE

DATE

LAND OFFICE

TRANSPORTER

OIL  
GAS

OPERATOR

REGISTRATION OFFICE

Operator

ODESSA NATURAL CORPORATION

ATTN: John Strojek

Address

P.O. Box 3908 Odessa, Texas 79760

Reason(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

## II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Little Federal 29	1	Chacon Dakota Associated	State, Federal or Fee Federal	NM 28713
Location				
Unit Letter	F	1850 Feet From The North Line and 1675 Feet From The West		
Line of Section	29	Township 24N	Range 3W	NMPM, Rio Arriba County

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Plateau, Inc.	P.O. Box 108, Farmington, N.M. 87401					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P.O. Box 990, Farmington, N.M. 87401					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	29	24N	3W	No	Unknown

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		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
7/8/78	9/20/78		7600'		7403'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
7037' K.B.	Dakota		7220'		7224'			
Perforations					Depth Casing Shoe			
7220'-7268', 7276'-7286', 7339'-7369'					7563'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		371'		350			
7-7/8"	4-1/2"		7563'		885			
	2-3/8"		7224'		Packer - 7157'			

## 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.)	
10/13/78	10/19/78	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	1000 psig	Packer	3/4"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	260	-0-	550

## 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

## 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.

FOR: ODESSA NATURAL CORPORATION

(Ewell N. Walsh, P.E.) President  
Walsh Engineering & Prod. Corp.

(Title)

11/14/78

(Date)

## OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY Original Signed by J. P. Tordick

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.