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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

TRANSPORTER CHANGED FROM SHELL
OIL COMPANY TO SHELL PIPE LINE
CORPORATION EFFECTIVE 12/31/69

I. Operator
Caulkins Oil Company
Address
P. O. Box 780, Farmington, New Mexico
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Breech "C"	Well No. 323	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal
Location Unit Letter M ; 890 Feet From The South Line and 1190 Feet From The West Line of Section 14 , Township 26 North Range 6 West , 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 checked="" type="checkbox"/> Shell Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1588, Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Gas Company	Address (Give address to which approved copy of this form is to be sent) Fidelity Union Tower Building 1507 Pacific Avenue, Dallas 1, Texas					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 9	Twp. 26N	Rge. 6W	Is gas actually connected? No	When 10 days from date

If this production is commingled with that from any other lease or pool, give commingling order number:

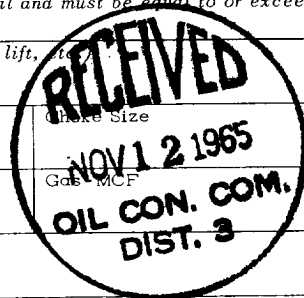
IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 6-21-65	Date Compl. Ready to Prod. 8-20-65	Total Depth 7670		P.B.T.D. 7610				
Pool Basin Dakota	Name of Producing Formation Dakota	Top Oil/Gas Pay 7346		Tubing Depth 7327				
Perforations 7608-7600, 7586-7574, 7540-7530, 7494-7482, 7390-7346				Depth Casing Shoe 7656				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13-3/4"	9-5/8"		273		200			
7-7/8"	4-1/2"		7656		700			

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.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.



GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
5963	3 hours		
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
1 point BP	SI 2444, 3 hr flow 400	SI 2469, 3 hr flow 981	.75"

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.

Frank Bray
(Signature)
Superintendent
(Title)
November 11, 1965
(Date)

OIL CONSERVATION COMMISSION

APPROVED **NOV 15 1965**, 19
BY **Original Signed 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 Sections I, II, III, and VI only 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.