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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

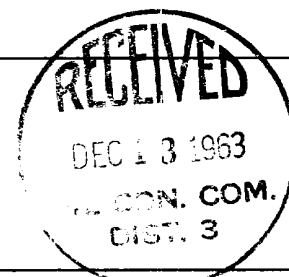
Company or Operator <u>Discuter Oil Company</u>				Lease <u>N. Mex. Federal</u>		Well No. <u>1</u>	
Unit Letter <u>C</u>	Section <u>12</u>	Township <u>20N</u>	Range <u>30W</u>	County <u>San Juan</u>			
Pool <u>London District</u>				Kind of Lease (State, Fed, Fee) <u>Fee</u>			
If well produces oil or condensate give location of tanks			Unit Letter <u>C</u>	Section <u>12</u>	Township <u>20N</u>	Range <u>30W</u>	
Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/> <u>Discuter Corp. - Hobbs</u>				Address (give address to which approved copy of this form is to be sent) <u>305 1st Tower, Amarillo, Tex.</u>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> <u>LA Petro Well Gas Co.</u>			Date Connected <u>2-3-63</u>	Address (give address to which approved copy of this form is to be sent) <u>Box 207, Farmington, N. Mex.</u>			

If gas is not being sold, give reasons and also explain its present disposition:

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐ Change in Ownership ..... ☐  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate.. ☐

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 13th day of December, 19 63.

OIL CONSERVATION COMMISSION		By	
Approved by <u>Original Signed By</u> <u>A. R. KENDRICK</u>		Original Signed By <u>G. L. WADE</u>	
Title <u>PETROLEUM ENGINEER DIST. NO. 3</u>		Title <u>Area Man.</u>	
Date <u>DEC 13 1963</u>		Company <u>Discuter Oil Co.</u>	
		Address <u>Box 207, Hobbs, N. Mex.</u>	



**LTR**



**Job separation sheet**



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	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  
**Tidewater Oil Company**  
Address  
**Box 249, Hobbs, New Mexico**  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
**Change in lease name. Formerly  
New Mexico Federal Deep Unit #13-W  
Well #1**

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Garrett-Federal Com. #2</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>Basin Dakota</b>	Kind of Lease State, Federal or Fee <b>Fed.</b>
Location Unit Letter <b>E</b> ; <b>2310</b> Feet From The <b>North</b> Line and <b>790</b> Feet From The <b>West</b> Line of Section <b>13</b> , Township <b>29N</b> Range <b>11W</b> , NMPM, <b>San Juan</b> 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"/> <b>McWood Corp.</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 1702, Farmington, New Mexico</b>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <b>El Paso Natural Gas Co.</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 990, Farmington, New Mexico</b>					
If well produces oil or liquids, give location of tanks.	Unit <b>E</b>	Sec. <b>13</b>	Twp. <b>29N</b>	Rge. <b>11W</b>	Is gas actually connected? <b>Yes</b>	When <b>1963</b>

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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Pool	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

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

Original Signed By  
**O. L. WADE**

(Signature)

**Area Supt.**

(Title)

**April 29, 1966**

(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAY 2 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 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.