

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-1
Effective 1-1-65

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I. Operator
Delaware-Apache Corporation

Address
1720 Wilco Bldg. Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well ☒

Recompletion ☐

Change in Ownership ☐

Change in Transporter of:

Oil ☐

Casinghead Gas ☐

Dry Gas ☐

Condensate ☐

~~Oil and Gas~~ GAS MUST NOT BE
FLARED AFTER 9/13/71
UNLESS AN EXCEPTION TO R-4070
IS OBTAINED

If change of ownership give name
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Keohane	Well No. 1	Pool Name, Including Formation Vada Penn R-4194	Kind of Lease State, Federal or Fee Fee	Lease No.
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Location

Unit Letter N : 3300 Feet From The East Line and 660 Feet From The South

Line of Section 7 Township 9S Range 34E, NMPM, Lea 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"/> Mobil	Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas 75221
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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)
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If well produces oil or liquids,
give location of tanks.

Unit N	Sec. 7	Twp. 9S	Rge. 34E
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Is gas actually connected? When

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 <input checked="" 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"/>
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Date Spudded 6-2-71	Date Compl. Ready to Prod. 7-13-71	Total Depth 9700	P.B.T.D. 9663
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Elevations (DF, RKB, RT, GR, etc.) Gr 4314'	Name of Producing Formation Bough "C"	Top Oil/Gas Pay 9634	Tubing Depth 9551
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Perforations 9634-9661	Depth Casing Shoe
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TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	361	375 SX
11"	8-5/8"	3957	375 SX
7-7/8"	5-1/2"	9700	400 SX
	2-3/8"	9551	

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 7-13-71	Date of Test 7-13-71	Producing Method (Flow, pump, gas lift, etc.) Pump 4" x 2-3/8" x 2-3/8"
Length of Test 24 hrs	Tubing Pressure 2250 psi	Casing Pressure Choke Size
Actual Prod. During Test 1675 bbls.	Oil - Bbls. 295	Water - Bbls. 1380
		Gas - MCF 160

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.

Bonnie Husband
(Signature)

Production Clerk
(Title)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

SUPERVISOR DISTRICT #1

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.

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JUL 14 1971

OIL CHEMISTS ASSN.
WASHINGTON