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LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-101 and C-111
Effective 1-1-65

Operator Saxon Oil Company	
Address 3325 W. Wadley Midland, TX 79703	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change In Transporter of: Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change In Ownership <input type="checkbox"/>	

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Lario State	Well No. 1	Pool Name, Including Formation Bar U (Penn)	Kind of Lease State, Federal or Fee State	Lease No.
Location Unit Letter 0 : 660 Feet From The South Line and 1874 Feet From The East				
Line of Section 1 Township 9-S Range 32-E, NMPM, Lea County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> International Crude Corporation	Address (Give address to which approved copy of this form is to be sent) 2454 Industrial Blvd. Abilene, TX 79605					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 300 Tulsa, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 1	Twp. 9S	Rge. 32E	Is gas actually connected? YES	When April, 1976

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
Date Spudded 1/10/76	Date Compl. Ready to Prod. 2/7/76	Total Depth 9250'	P.B.T.D. 9171' (Pkr w/Plug)					
Elevations (DF, RKB, RT, GR, etc.) 4421' KB, 4407' GR	Name of Producing Formation Bough B	Top Oil/Gas Pay 9138'	Tubing Depth 9160'					
Perforations 9138' - 9150' (13 Holes) 1 JSPF			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 11"	CASING & TUBING SIZE 8-5/8"	DEPTH SET 3650'	SACKS CEMENT 400sx					
7-7/8"	5-1/2"	9250'	250sx					

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)

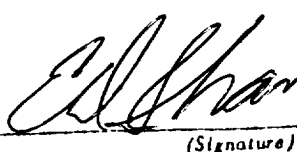
Date First New Oil Run To Tanks 3-29-76	Date of Test 3-29-76	Producing Method (Flow, pump, gas lift, etc.) Swab	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls. 16	Water-Bbls. 100	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	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.


(Signature)

Production Superintendent
(Title)

5-27-82
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 8 1982, 19

BY ORIGINAL SIGNED BY

JERRY SEXTON
TITLE DISTRICT COM

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 re-completed 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.