

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
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-104 and C-110  
Effective 1-1-65

I. Operator  
**The Superior Oil Company**  
Address  
**P. O. Box 1900, Midland, Texas 79701**  
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)

If change of ownership give name  
and address of previous owner -----

II. DESCRIPTION OF WELL AND LEASE  
Lease Name **State "F"** Lease No. **K-191** Well No. **1** Pool Name, Including Formation **Tatum (Wolfcamp) R-3402** Kind of Lease **State**  
Location  
Unit Letter **B** ; **660** Feet From The **North** Line and **2130** Feet From The **East**  
Line of Section **5** Township **13-S** Range **36-E** , NMPM, **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
**Admiral Crude Oil Corporation** Address (Give address to which approved copy of this form is to be sent)  
**P. O. Box 1713, Midland, Texas 79701**  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐  
Address (Give address to which approved copy of this form is to be sent)  
If well produces oil or liquids, give location of tanks. Unit **B** Sec. **5** Twp. **13-S** Rge. **36-E** Is gas actually connected? **No** 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 ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☐  
Date Spudded **11-12-67** Date Compl. Ready to Prod. **1-1-68** Total Depth **10,500** P.B.T.D. **10,430**  
Elevations (DF, RKB, RT, GR, etc.) **4016 KB, 4014 DF, 4001GL** Name of Producing Formation **Wolfcamp** Top Oil/Gas Pay **9639 (-5623)** Tubing Depth **10,325**  
Perforations **10,362-10,366 with 2 jet shots per foot** Depth Casing Shoe **10,500**  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
**15"** **11-3/4" casing** **350** **350 sacks**  
**11"** **8-5/8" casing** **4500** **618 sacks**  
**7-7/8"** **5-1/2" casing** **10,500** **250 sacks**  
**-----** **2-7/8" tubing** **10,325 in Model "D" pkr** **-----**

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 <b>1-1-68</b>	Date of Test <b>1-24-68</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pump</b>	
Length of Test <b>24 hours</b>	Tubing Pressure <b>P</b>	Casing Pressure <b>25#</b>	Choke Size <b>---</b>
Actual Prod. During Test <b>86</b>	Oil-Bbls. <b>28</b>	Water-Bbls. <b>58</b>	Gas-MCF <b>12</b>

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.

**O. V. Savage** (O. V. Savage)  
(Signature)

Production Engineer

(Title)

January 31, 1968

(Date)

OIL CONSERVATION COMMISSION

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

BY **John A. Ramsey**

TITLE \_\_\_\_\_

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.