

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

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

I. Operator
Sohio Petroleum Company

Address
P.O. Box 3167, Midland, Texas 79701

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 Alves	Well No. 3	Pool Name, including Formation Eunice, N., San Andres Gas	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter A	660	Feet From The North Line and	660	Feet From The East
Line of Section 18	Township 21S	Range 37E	, 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, Texas 77001			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northern Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 3316, Midland, Texas 79701			
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 18	Twp. 21S	Rge. 37E
	is gas actually connected?		When November 13, 1972	

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.
		X	X					
Date Spudded 7-6-72	Date Compl. Ready to Prod. 8-23-72	Total Depth 4250		P.B.T.D. 4210				
Elevations (DF, RKB, RT, GR, etc.) 3489 KB	Name of Producing Formation San Andres	Top Oil/Gas Pay 4085		Tubing Depth 4037				
Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8		1275		250 Sks. Incor(4% gel)			
					130 Sks. Incor(2% cc)			
7-7/8	5-1/2		4243		200 Sks. Incor 4% gel. -			
	2-3/8		4037		150 Incor			

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 943	Length of Test 5Hrs.	Bbls. Condensate/MMCF 25	Gravity of Condensate 35.6
Testing Method (pitot, back pr.) Drifice & Back Press.	Tubing Pressure (shut-in) 375	Casing Pressure (shut-in) Pkr.	Choke Size 29/64

VI. CERTIFICATE OF COMPLIANCE Calc. AOF 1,540 MCF

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.

Burton Whiteley
(Signature) **Burton Whiteley**
District Superintendent
(Title)
11/7/72
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 22 1972, 19____

BY J. D. [Signature]

TITLE SUPERVISOR DISTRICT

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.

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NOV 8 1972

OIL CONSERVATION COMM.
HOUSTON, TEXAS