## DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION ANTA FE Form C-104 REQUEST FOR ALLOWABL. Supersedes Old C-104 and C Effective 1-1-65 ILE AND .s.g.s. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRANSPORTER GAS **OPERATOR** PRORATION OFFICE Operator Petro-Lewis Corporation Address 401 Fort Worth Club Building, Fort Worth, Texas 76102 Reuson(s) for filing (Check proper box) Other (Please explain) Change in Transporter of: Recompletion Dry Gas Change in Ownership Casinghead Gas If change of ownership give name Wood, McShane & Thams-692, Limited., P. O. Box 968, Texas 7975 and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation New Mexico M State 12 Eumont Gas (Yates & 7-Rivers) State, Federal or Fee State Location 660 Unit Letter \_Feet From The \_\_\_SOUTH \_Line and \_\_\_\_ 660 Feet From The west 17 22-S Line of Section 37-E Township Range III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas 🔏 Address (Give address to which approved copy of this form is to be sent) SELPeso Naturala Gas Co. B8× 1384 Jal New Mexico Sec. Twp. Pige. oduces oil or liquids, 29 $\mathbf{C}$ 22-S:37-E Yes Jan. 13, 1974 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oll Well Gas Well New Well Workover Same Resty. Diff. Easty Plug Back Designate Type of Completion - (X) Χ Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. 10-18-56 3 5 2 2 **'** Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth 3401' (GL) Yates & 7-Divers 25981 <u>3560'</u> Depth Casing Shoe 2598"-3182" 3622' (GL) TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 11" <u>8-5/8"</u> 456 **'** 325 sx

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 allow able for this depth or be for full 24 hours) OIL WELL Date First New Cil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)

4-1/2"

Length of Test Tubing Pressure Casing Pressure Choke Size Actual Prod. During Test Ott-Bbla. Water - Bbls. Gas - MCF

APPROVED

3,535

GAS WELL 195.0 Length of Test 24 hours est-MCF/D Testing Method (pitot, back pr.)
Orifice Tubing Pressure (Shut-in)
30 psi

Bbls. Condensate/MMCF Gravity of Condensate Choke Size none Casing Pressure (Shut-in)

OIL CONSERVATION COMMISSION

1550 sx

0 0 1074

Monahans,

Lease No

B - 934

## VI. CERTIFICATE OF COMPLIANCE

7-7/8"

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

(Date)

Petroleum Engineer

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(Title)

Geologist
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. Concrete Forms C-104 must be filed for each cost in multing