

**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
Summit Energy, Inc.
Address
112 N. First St., Artesia, New Mexico 88210

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 _____
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: A. M. Drinkard Well No.: 2 Pool Name, including Formation: Abo -- Undesignated Kind of Lease: Fee Lease No.:
 Location: Unit Letter I ; 2310 Feet From The South Line and 990 Feet From The East
 Line of Section 30 Township 22 S Range 38 E , NMFM, Lea County

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)
 Texas-New Mexico Pipeline Eunice, New Mexico 88231
 Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)
 (Getty) Oil Company Eunice, New Mexico 88231

If well produces oil or liquids, give location of tanks. Unit I Sec. 30 Twp. 22 S Rge. 38 E Is gas actually connected? Yes When 3-16-77

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v. <input checked="" type="checkbox"/>
Date Spudded 2-2-77	Date Comp. Ready to Prod. 3-15-77	Total Depth 7550	P.B.T.D. 7350					
Elevations (DF, RKB, RT, GR, etc.) 3368.9 GR.	Name of Producing Formation Abo	Top Oil/Gas Pay 6922	Tubing Depth 7000 (Packer)					
Perforations 7164 - 7216			Depth Casing Shoe 7549					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	1185	600
7 7/8"	5 1/2"	7549	700
	2 7/8"	7000	-

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 3-10-77	Date of Test 3-14-77	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24	Tubing Pressure 160	Casing Pressure Packer	Choke Size 32/64
Actual Prod. During Test 85 Bbls.	Oil-Bbls. 85	Water-Bbls. Trace	Gas-MCF 500

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.

Paul White
(Signature)
Vice President - Production
(Title)
March 16, 1977
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
 BY James H. ...
 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 deviated 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 multiphase completed wells.

116x

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MAR 17 1977

OIL CONSERVATION COMM.
HOUSTON, TEXAS