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SANTA FE				
FILE		1		
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR				
PRORATION OFFICE				

III.

IV.

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTAFE	REQUES	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-11		
FILE		AND Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TE	RANSPORT OIL AND NATURAL	GAS	
LAND OFFICE				
TRANSPORTER OIL				
GAS				
OPERATOR	 -			
PRORATION OFFICE Operator				
Bronco Oil	Corporation			
Reason(s) for filing (Check proper l	5114, Midland, Texas			
New Well X	•	Other (Please explain)		
Recompletion	Change in Transporter of:			
Change in Ownership	Oil Dry C	}****		
Circlide III Ownership	Casinghead Gas Cond	lensate		
If change of ownership give name			,21	
and address of previous owner		1 det to 1	1 June 1	
H DECORDED OF THE LAND			1-11/1/2	
II. DESCRIPTION OF WELL AN	Well No. Pool Name, Including			
			Lease 140.	
Saltmount	2 Undesignated		rdl or Fee Fee	
		bb Drinkard K-3731		
Unit Letter U;	660 Feet From The South L	ine and 1980 Feet From	The East	
Line of Section 21	Township 23-S Range	37-E , NMPM, Le	ea County	
Name of Authorized Transporter of	RTER OF OIL AND NATURAL G	AS		
i		Address (Give address to which appr	oved copy of this form is to be sent)	
Shell Pipeline Co		Box 2099, Houston, Te	exas	
Name of Authorized Transporter of (Address (Give address to which appr	oved copy of this form is to be sent)	
El Paso Natural (exas	
If well produces oil or liquids,	Unit Sec. Twp. Rge.		hen	
give location of tanks.	0 21 23 37	No		
If this production is commingled	with that from any other lease or pool	, give commingling order number:		
V. COMPLETION DATA				
Designate Type of Complete	tion — (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
		<u> </u>		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
9-14-67	12-22-67	6396'	6340'	
Elevations (DF, RKB, RT, GR, etc.,	l l	Top Oil/Gas Pay	Tubing Depth	
3306.5 GR	Tubb-Drinkard	6156' 5949'		
Perforations 6153' - 6243'			Depth Casing Shoe	
0133 0243		1	6396'	
	TUBING, CASING, AN	D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12-1/4"	9-5/8"	1066'	450	
8-3/4"	7"	6396'	400	
	2-3/8"	5949'		
. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load oi	l and must be equal to or exceed top allow-	
OIL WELL	able for this d	epth or be for full 24 hours)		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
11 Oct 67	22 Dec 67	Flow		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
10 hrs.	125#	450#	32/6 "	
Actual Prod. During Test	Oil-Bble.	Water - Bbis.	Gas-MCF	
360	360	None	666 MCF	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
. CERTIFICATE OF COMPLIA	NCE	OIL CONSERV	ATION COMMISSION	
The state of the s	- 	JIL CONSERVA	TION CONNINGSION	
I hereby certify that the miles and	regulations of the Oil Consequents	APPROVED	. 19	
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.				
		TITLE		
ma (M () Du	This form is to be filed in	compliance with RULE 1104.	
111/201	1111 / /// / / / / / / / / / / / / / /	II		

(Strouture)

Vice President

26 January 1968

(Date)

. 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.