

NEW MEXICO OIL CONSERVATION COMMISSION	
RECEIVED	
DATE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-101 and C-102
Effective 1-1-65

Operator Meyer & Associates, Inc.

Address P. O. Box 7764, Midland, TX 79703

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of: Oil ☒ Dry Gas ☐
Recompletion ☐	Casinghead Gas ☐ Condensate ☐
Change in Ownership ☒	

Change of ownership give name and address of previous owner: GW Corp. 675 Empire Plaza, Midland, TX 79701-4289

DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Lease Name		5	Comanche Stateline Tansil	State, Federal or Fee	L6379
Location			Water, SR, Qu		
Unit Letter	H	330	Feet From The South	Line and	990
Line of Section	33	Township	26S	Range	36E
				County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Oil ☒ or Condensate ☐		8700 Tesoro Drive, San Antonio, TX 78286				
Tesoro Petroleum Corp.						
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐		Address (Give address to which approved copy of this form is to be sent)				
El Paso Natural Gas Company		P. O. Box 1492, El Paso, TX 79978				
Is well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	33	26S	36E	Yes	6-26-78

this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Unif. Restv.
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.D.T.D.					
Elevations (L.S., R.R., R.F., CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
Perforations				Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	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

AS ORDERED	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Actual Prod. (oil, gas, etc.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED _____, 1982	
Production Clerk		BY _____	
8-18-82		TITLE _____	
(Signature)		This form is to be filed in compliance with RULE 1104.	
(Title)		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 logs taken on the well in accordance with RULE 111.	
(Date)		All portions of this form must be filled out completely for allowance on new and re-completed 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 conditions.	