

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
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-104 and C-105
Effective 1-1-65

Operator

Flag-Redfern Oil Company

Address

P. O. Box 23 Midland, Texas 79702

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)

CASINGHEAD GAS MUST NOT BE
PIARED AFTER 5-8-79
UNLESS AN EXCEPTION TO B-407C
IS OBTAINED.

If change of ownership give name
and address of previous owner

N.A.

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No., Pool Name, Including Formation	Kind of Lease	Lease No.
Lynn "B-25" Federal	5 Langlie-Mattix	State, Federal or Fee Federal	NM-2164
Location			
Unit Letter L	1980 Feet From The South Line and	560 Feet From The West	
Line of Section 25	Township 23-S	Range 36-E	County Lea

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)
Basin, Inc.	Box 2297 Midland, Texas 79702
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 Co.	P. O. Box 1492 El Paso, Texas 79978
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
L 25 23-S 36-E	No Est. 3-30-79

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

No

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'tv. ☐ Diff. Res'tv. ☐		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
1-22-79	3-8-79	3700'	3597'
Elevations (DF, Rkb, RT, GR, etc.)	Name of Producing Formation	Top Oil, Gas Pay	Taking Depth
3344' RKB	Basal Seven Rivers	3382'	3565'
Perforations			Depth Casing Shoe
3382' - 3390', 3475' - 3483', 3514 - 3522'			3700'
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8-5/8"	1226'	425 sx HLW & 200 sx "C"
7-7/8"	4-1/2"	3700'	330 sx Pozmix

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)

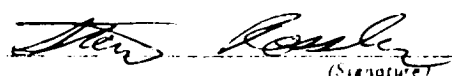
Date First Flow Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
3-8-79	3-21-79	Pumping - 2" X 1 1/2" X 14' RHBC Pump	
Length of Test	Testing Pressure	Casing Pressure	Choke Size
24 hrs.	-----	-----	-----
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	30	5	390

GAS WELL

Actual First Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
NA			
Testing Method (puff, back prod)	Testing 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.



Petroleum Engineer

3-22-79

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED

MAR 23 1979

BY

TITLE

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 deviations 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 multiple.