NO. OF COPIES REC	EIVED	i	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
THAIGH ON TER	GAS		
OPERATOR			
PROBATION OFFICE			

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE D. C. C.

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

	U.S.G.S.	ADTHORIZATION TO I	RANSPURI () II AND NATURAL	GAS				
	LAND OFFICE		RANSPORT OIL AND NATURAL					
	TRANSPORTER OIL		-, 00					
	TRANSPORTER GAS							
	OPERATOR	□						
Γ	PRORATION OFFICE	7						
l	Operator Stoltz & Company							
	c/o Oil Reports &	Gas Services, Box 763,	Hobbs, New Mexico					
1	Reason(s) for filing (Check proper bo	)x)	Other (Please explain)					
	New Well	Change in Transporter of:						
	Recompletion	Oil Dry	Gas					
	Change in Ownership	Casinghead Gas Con	ndensate					
a . <u>]</u>	f change of ownership give name and address of previous owner  DESCRIPTION OF WELL AND Lease Name		y-Lower Pennsylvanian Formation R-3455 Kind of Le					
	Nellie	1 -Undes N. Bagle	ey Lower Penn 1,1 State, Fed	lergi or Fee State K-3955				
	Location  Unit Letter;	O Feet From The North	Line and Feet Fro	om The East				
	30	ownship 11 S Range	33 E , NMPM, Lea	County				
L	Line of Section	ownship — Runge	, INVIETOR,	Count				
	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)							
. <b>I</b>	Name of Authorized Transporter of C	or Condensate	Address (Give address to which ap	proved copy of this form is to be sent)				
. <u>I</u>	Name of Authorized Transporter of C Admiral Crude Oil	Corp.	Box 1713, Midland,	Texas				
. <u>I</u>	Name of Authorized Transporter of C Admiral Crude Oil	Oil 🔏 💮 or Condensate 🦳	Box 1713, Midland,					
. <u>]</u>	Name of Authorized Transporter of C  Admiral Crude Oil  Name of Authorized Transporter of C	Corp.	Address (Give address to which ap  Rox 1713, Midland,  Address (Give address to which ap	Texas				
I	Name of Authorized Transporter of C  Admiral Grude Oil  Name of Authorized Transporter of C  Rone  If well produces oil or liquids, give location of tanks.	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 115 33  with that from any other lease or po	Address (Give address to which ap  Rox 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:	Texas proved copy of this form is to be sent) When				
I	Name of Authorized Transporter of C  Admiral Grude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled well are the commingle well are the	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 115 33  with that from any other lease or po	Address (Give address to which ap  Rox 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:	Texas proved copy of this form is to be sent)				
I	Name of Authorized Transporter of C  Admiral Grude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  Coil Well Gas Well  Date Compl. Ready to Prod.	Address (Give address to which ap  Rox 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:	Texas proved copy of this form is to be sent) When				
I	Name of Authorized Transporter of C  Admiral Grude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complete	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen	Texas  proved copy of this form is to be sent)  When  Plug Back   Same Resty.   Diff. Res				
I .	Name of Authorized Transporter of C  Admiral Grude Oil  Name of Authorized Transporter of C  Rone  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68	or Condensate Corp.  Corp.  Casinghead Gas or Dry Gas   Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  tion — (X) Gas Well  Date Compl. Ready to Prod.  6/22/68	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X  Total Depth	Texas  proved copy of this form is to be sent)  When  Plug Back   Same Resty.   Diff. Res				
I	Name of Authorized Transporter of C  Admiral Grude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded	or Condensate Corp.  Corp.  Casinghead Gas or Dry Gas   Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  tion — (X) Gas Well  Date Compl. Ready to Prod.  6/22/68	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X  Total Depth  10,300  Top Oli/Gas Pay	Plug Back   Same Resty.   Diff. Res				
I .	Name of Authorized Transporter of C  Admiral Crude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68  Elevations (DF, RKB, RT, GR, etc.)  4282 GR  Perforations	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  tion — (X) X  Date Compl. Ready to Prod.  6/22/68  Name of Producing Formation  Lower Penn	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X  Total Depth  10,300	Plug Back Same Resiv. Diff. Res  P.B.T.D.  10,226  Tubing Depth  9755  Depth Casing Shoe				
I .	Name of Authorized Transporter of C  Admiral Crude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68  Elevations (DF, RKB, RT, GR, etc.)  4282 GR  Perforations	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  tion — (X) X  Date Compl. Ready to Prod.  6/22/68  Name of Producing Formation  Lower Penn  10,007-09, 10,115-17	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X  Total Depth  10,300  Top Oli/Gas Pay  9795	Plug Back   Same Resty.   Diff. Res				
I .	Name of Authorized Transporter of C  Admiral Grude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68  Elevations (DF, RKB, RT, GR, etc.)  4282 GR  Perforations  9795-97, 9991-93,	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  tion — (X) X  Date Compl. Ready to Prod.  6/22/68  Name of Producing Formation  Lower Penn  10,007-09, 10,115-17  TUBING, CASING,	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X  Total Depth  10,300  Top Ot./Gas Pay  9795	Plug Back Same Res'v. Diff. Res  P.B.T.D.  10,226  Tubing Depth  9755  Depth Casing Shoe  10,300				
I .	Name of Authorized Transporter of C  Admiral Grude Oil  Name of Authorized Transporter of C  Rone  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68  Elevations (DF, RKB, RT, GR, etc.)  4282 GR  Perforations  9795-97, 9991-93,	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  tion — (X) X  Date Compl. Ready to Prod.  6/22/68  Name of Producing Formation  Lower Penn  10,007-09, 10,115-17  TUBING, CASING, A  CASING & TUBING SIZE	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X  Total Depth  10,300  Top Oli/Gas Pay  9795  AND CEMENTING RECORD  DEPTH SET	Plug Back   Same Resty.   Diff. Resty   P.B.T.D.   10,226   Tubing Depth   9755   Depth Casing Shoe   10,300   SACKS CEMENT				
I .	Name of Authorized Transporter of C  Admiral Grude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68  Elevations (DF, RKB, RT, GR, etc.)  4282 GR  Perforations  9795-97, 9991-93,  HOLE SIZE  17 1/2	or Condensate Corp.  Corp.  Casinghead Gas or Dry Gas Casinghead Gas Casinghead Gas Casinghead Gas Well Casinghead Casin	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X  Total Depth  10,300  Top Ol:/Gas Pay  9795  AND CEMENTING RECORD  DEPTH SET  375	Plug Back Same Resty. Diff. Res  P.B.T.D.  10,226  Tubing Depth  9755  Depth Casing Shoe  10,300  SACKS CEMENT  300				
I .	Name of Authorized Transporter of C  Admiral Grude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68  Elevations (DF, RKB, RT, GR, etc.)  4282 GR  Perforations  9795-97, 9991-93,  HOLE SIZE  17 1/2	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  tion — (X) X  Date Compl. Ready to Prod.  6/22/68  Name of Producing Formation  Lower Penn  10,007-09, 10,115-17  TUBING, CASING, A  CASING & TUBING SIZE  13 3/8  8 5/8	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X  Total Depth  10,300  Top 01:/Gas Pay  9795  AND CEMENTING RECORD  DEPTH SET  375  3728	Plug Back Same Resty. Diff. Res  P.B.T.D.  10,226  Tubing Depth  9755  Depth Casing Shoe  10,300  SACKS CEMENT  300  200				
I .	Name of Authorized Transporter of C  Admiral Grude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68  Elevations (DF, RKB, RT, GR, etc.)  4282 GR  Perforations  9795-97, 9991-93,  HOLE SIZE  17 1/2	or Condensate Corp.  Corp.  Casinghead Gas or Dry Gas Casinghead Gas Casinghead Gas Casinghead Gas Well Casinghead Casin	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X  Total Depth  10,300  Top Ol:/Gas Pay  9795  AND CEMENTING RECORD  DEPTH SET  375	Plug Back Same Resty. Diff. Res  P.B.T.D.  10,226  Tubing Depth  9755  Depth Casing Shoe  10,300  SACKS CEMENT  300				
	Name of Authorized Transporter of C  Admiral Crude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68  Elevations (DF, RKB, RT, GR, etc.)  4282 GR  Perforations  9795-97, 9991-93,  HOLE SIZE  17 1/2  11  7 7/8	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  tion — (X) X  Date Compl. Ready to Prod.  6/22/68  Name of Producing Formation  Lower Penn  10,007-09, 10,115-17  TUBING, CASING, A  CASING & TUBING SIZE  13 3/8  8 5/8  4 1/2  FOR ALLOWABLE (Test must 8	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X  Total Depth  10,300  Top Oi:/Gas Pay  9795  AND CEMENTING RECORD  DEPTH SET  375  3728  10300	Plug Back Same Resty. Diff. Res  P.B.T.D.  10,226  Tubing Depth  9755  Depth Casing Shoe  10,300  SACKS CEMENT  300  200				
	Name of Authorized Transporter of C  Admiral Crude Oil  Name of Authorized Transporter of C  Rone  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68  Elevations (DF, RKB, RT, GR, etc., 4282 GR  Perforations  9795-97, 9991-93,  HOLE SIZE  17 1/2  11  7 7/8  TEST DATA AND REQUEST OIL WELL  Date First New Oil Run To Tanks	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  tion — (X) X  Date Compl. Ready to Prod.  6/22/68  Name of Producing Formation  Lower Penn  10,007-09, 10,115-17  TUBING, CASING, A  CASING & TUBING SIZE  13 3/8  8 5/8  4 1/2  FOR ALLOWABLE (Test must be able for this	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X  Total Depth  10,300  Top Ol:/Gas Pay  9795  AND CEMENTING RECORD  DEPTH SET  375  3728  10300	Plug Back   Same Resty.   Diff. Resty    Plug Back   Same Resty.   Diff. Resty    P.B.T.D.   10,226    Tubing Depth   9755    Depth Casing Shoe   10,300    SACKS CEMENT   300    200   500    cil and must be equal to or exceed top allowed to the series of				
	Name of Authorized Transporter of C  Admiral Crude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68  Elevations (DF, RKB, RT, GR, etc.)  4282 GR  Perforations  9795-97, 9991-93,  HOLE SIZE  17 1/2  11  7 7/8  TEST DATA AND REQUEST  OIL WELL  Date First New Oil Run To Tanks  6/22/68  Length of Test	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  tion — (X) X  Date Compl. Ready to Prod.  6/22/68  Name of Producing Formation  Lower Penn  10,007-09, 10,115-17  TUBING, CASING, A  CASING & TUBING SIZE  13 3/8  8 5/8  4 1/2  FOR ALLOWABLE (Test must be able for this.)  Date of Test  6/23-24/68  Tubing Pressure	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X  Total Depth  10,300  Top Oi:/Gas Pay  9795  AND CEMENTING RECORD  DEPTH SET  375  3728  10300  be after recovery of total volume of load a depth or be for full 24 hours)  Producing Method (Flow, pump, ga	Texas  proved copy of this form is to be sent)  When  Plug Back Same Res'v. Diff. Res  P.B.T.D.  10,226  Tubing Depth 9755  Depth Casing Shoe 10,300  SACKS CEMENT 300 200 500  cil and must be equal to or exceed top allows lift, etc.)  Choke Size				
	Name of Authorized Transporter of C  Admiral Crude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68  Elevations (DF, RKB, RT, GR, etc.)  4282 GR  Perforations  9795-97, 9991-93,  HOLE SIZE  17 1/2  11  7 7/8  TEST DATA AND REQUEST  OIL WELL  Date First New Oil Run To Tanks  6/22/68	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  tion — (X) X  Date Compl. Ready to Prod.  6/22/68  Name of Producing Formation  Lower Penn  10,007-09, 10,115-17  TUBING, CASING, A  CASING & TUBING SIZE  13 3/8  8 5/8  4 1/2  FOR ALLOWABLE (Test must be able for this.)  Date of Test  6/23-24/68	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X Total Depth  10,300  Top 01:/Gas Pay  9795  AND CEMENTING RECORD  DEPTH SET  375  3728  10300  be after recovery of total volume of load a depth or be for full 24 hours)  Producing Method (Flow, pump, ga	Texas  proved copy of this form is to be sent)  When  Plug Back Same Resty. Diff. Res  P.B.T.D.  10,226  Tubing Depth 9755  Depth Casing Shoe 10,300  SACKS CEMENT 300 200 500  oil and must be equal to or exceed top allows the service of the servi				
	Name of Authorized Transporter of C  Admiral Crude Oil  Name of Authorized Transporter of C  None  If well produces oil or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Complet  Date Spudded  5/20/68  Elevations (DF, RKB, RT, GR, etc.)  4282 GR  Perforations  9795-97, 9991-93,  HOLE SIZE  17 1/2  11  7 7/8  TEST DATA AND REQUEST  OIL WELL  Date First New Oil Run To Tanks  6/22/68  Length of Test	Corp.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  A 32 11S 33  with that from any other lease or po  tion — (X) X  Date Compl. Ready to Prod.  6/22/68  Name of Producing Formation  Lower Penn  10,007-09, 10,115-17  TUBING, CASING, A  CASING & TUBING SIZE  13 3/8  8 5/8  4 1/2  FOR ALLOWABLE (Test must be able for this.)  Date of Test  6/23-24/68  Tubing Pressure	Address (Give address to which ap  Box 1713, Midland,  Address (Give address to which ap  Is gas actually connected?  No  ol, give commingling order number:  New Well Workover Deepen  X Total Depth  10,300  Top 01:/Gas Pay  9795  AND CEMENTING RECORD  DEPTH SET  375  3728  10300  be after recovery of total volume of load a depth or be for full 24 hours)  Producing Method (Flow, pump, gas  Flow  Casing Pressure	Texas  proved copy of this form is to be sent)  When  Plug Back Same Res'v. Diff. Res  P.B.T.D.  10,226  Tubing Depth 9755  Depth Casing Shoe 10,300  SACKS CEMENT 300 200 500  cil and must be equal to or exceed top allows lift, etc.)  Choke Size				

## VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

Actual Prod. Test-MCF/D

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.

Length of Test

Tubing Pressure (Shut-in)

A. L. Smith	
(Signature) Agent	
(Title) <b>6/24/68</b>	
(Date)	

OIL CONSERVATION COMMISSION

Bbls. Condensate/MMCF

Casing Pressure (Shut-in)

Gravity of Condensate

Choke Size

APPROVE 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 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.