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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-110
Effective 1-1-65

Operator Pauley Petroleum, Inc.		Casinghead Gas MUST NOT BE	
Address 10000 Santa Monica Blvd. - Los Angeles, CA 90067		SECTION TO RARE	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Change in Operator -	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	Former Operator - Lawbar Petroleum, Inc.	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	Former Lease Name - Tucker Fed.	

If change of ownership give name
and address of previous owner

Lease Name Tucker Federal		Well No. 1	Pool Name, Including Formation N. Chaveroo - Bough "C"	Kind of Lease State, Federal or Fee Fee	Lease No. N.A.
Location					
Unit Letter J	1980	Feet From The South	Line and 1980'	Feet From The East	
Line of Section 9	Township 7-S	Range 33-E	NMPM, Roosevelt	County	

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
The Permian Corporation		1509 W. Wall Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
None					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 9	Twp. 7-S	Rge. 33-E	Is gas actually connected? No
When					

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

Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 7-10-79	Date Compl. Ready to Prod. 10-11-79	Total Depth 9412'		P.B.T.D. 8495'					
Elevations (DF, RKB, RT, CR, etc.) 4401 G. L.	Name of Producing Formation Bough "C"	Top Oil/Gas Pay 8344'		Tubing Depth 8310'					
Perforations 8345 - 8358				Depth Casing Shoe 9412'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17 1/2"	12 3/4"		398'		550				
11"	8 5/8"		3947'		1924				
7 7/8"	4 1/2"		9412'		900				

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 10-17-79	Date of Test 10-19-79	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure Pumping	Casing Pressure Pumping	Choke Size None
Actual Prod. During Test 159.03	Oil - Bbls. 159.03	Water - Bbls. 370	Gas - MCF 121.06

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

E. G. Durrett (Signature)
Agent (Title)
10/22/79 (Date)
726 First National Bank Bldg.
Odessa, Texas 79760

OIL CONSERVATION COMMISSION

APPROVED **OCT 26 1979**, 19
BY **Supervisor District**
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 recompleted wells.