

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

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

**I. OPERATOR**

Operator  
**WILSON OIL COMPANY**

Address  
**206 Booker Bldg., Artesia, New Mexico 88210**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well  Change in Transporter of:

Recompletion  Oil  Dry Gas

Change in Ownership  Casinghead Gas  Condensate

If change of ownership give name and address of previous owner \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name <b>Charlotte State</b>	Well No. <b>4</b>	Pool Name, including Formation <b>Eumont R-616A</b>	Kind of Lease State, Federal or Fee State	Lease No. <b>E 1639</b>
Location				
Unit Letter <b>N</b>	<b>660</b>	Feet From The <b>South</b> Line and <b>4620</b>	<b>1880</b>	Feet From The <b>West</b> <b>East</b>
Line of Section <b>29</b>	Township <b>20S</b>	Range <b>36E</b>	, NMPM, <b>Lea</b> County	

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
<b>Phillips Petroleum</b>	<b>Bartlesville, Okla.</b>			
If well produces oil or liquids, give location of tanks.	Unit <b>N</b>	Sec. <b>29</b>	Twp. <b>20</b>	Rge. <b>36</b>
	is gas actually connected?		When	
	<b>Yes</b>		<b>1969</b>	

If this production is commingled with that from any other lease or pool, give commingling order number: **B 9131**

**IV. COMPLETION DATA**

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input 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 <b>7-18-51</b>	Date Compl. Ready to Prod. <b>10-7-51</b>		Total Depth <b>4201</b>		P.B.T.D. <b>4095</b>			
Elevations (DF, RKB, RT, GR, etc.) <b>3634</b>	Name of Producing Formation		Top Oil/Gas Pay <b>Perfs 3835-45</b>		Tubing Depth <b>3818</b>			
Perforations <b>3835'-45'</b>					Depth Casing Shoe <b>5 1/2 Liner 3982</b>			
<b>TUBING, CASING, AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

**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	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

**GAS WELL**

Actual Prod. Test-MCF/D <b>See Reverse side this report</b>	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.

*[Signature]*  
\_\_\_\_\_  
(Signature)  
**V. Pres**  
\_\_\_\_\_  
(Title)  
**11-19-79**  
\_\_\_\_\_  
(Date)

**OIL CONSERVATION COMMISSION**

APPROVED **NOV 26 1979**, 19\_\_\_\_\_  
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.

The subject well was recompleted as an oil well 3835-45' in 4-3-55. During the production life the GOR increased to 62,381-1 in 1965.

We commenced marketing the gas in 1969 by obtaining permission to comingle the gas with Charlotte State #2. Phillips would only take the gas on the comingling basis and if Wilson would lay the gathering line.

During the last 10 years production the GOR has increased to the point that the well is now basically a gas well.

A recent order # R 6169 of Oil Conservation Division placing the well in the Eumont pool. The October 1979 production was 272 MCF per month. Wilson is in the process of establishing the well a stripper gas well.

This C 104 is filed for the purpose of transferring the well to the Eumont pool as set out by the order R 6169.

RECEIVED

NOV 21 1979

OIL CONSERVATION DIV.