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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION 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

I. OPERATOR

Operator
American Trading and Production Corporation

Address
F. O. Drawer 992, Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	
		Dry Gas	<input type="checkbox"/>	
		Condensate	<input type="checkbox"/>	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name: **Southeast Lea Unit** Well No.: **1** Pool Name, including Formation: **Undesignated Devonian** Kind of Lease: **State** Lease No.: **OG 3825**

Location: Unit Letter **J**; **1980** Feet From The **East** Line and **1980** Feet From The **South**

Line of Section **26** Township **20S** Range **35E**, NMPM, **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate
The Permian Corporation Address (Give address to which approved copy of this form is to be sent)
F. O. Box 3119, Midland, Texas 79701

Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) _____

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	26	20S	35E	No	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
August 18, 1967	March 11, 1968	14,644'	14,644'
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3698' KB; 3679' GR.	Devonian	14,542'	14,500'
Perforations			Depth Casing Shoe
Open Hole: 14,556'-14,644'			14,556'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	835'	500 Sks.
12-1/4"	9-5/8"	5502'	700 Sks.
8-3/4"	7"	12090'	1115 Sks.
6"	5" Liner	11846 - 14556'	317 Sks.

V. 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.)	
March 27, 1968	April 1, 1968	Gas Lift	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hours	0 - 150#	1080#	3/4"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
373	210	163	330

GAS WELL

Actual Prod. Test - MCF/D	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.

J. W. Vidrine
(Signature)
District Engineer
(Title)
April 2, 1968
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY *[Signature]*
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.

* Devonian Long String: 2-3/8" Buttress Tubing - 14,500' - Packer
Wolfcamp Short String: 2-3/8" Buttress Tubing - 11,336' - Dual Packer