

NO. OF COPIES RECEIVED  
DISTRIBUTION  
SANTA FE  
FILE  
U.S.O.S.  
LAND OFFICE  
TRANSPORTER OIL  
GAS  
OPERATOR  
PROCRATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Original cc: OGC, Hobbs  
cc: Regional Office  
cc: file

I. Operator  
SINGLIER OIL & GAS CORPORATION  
Address  
P. O. BOX 1920, Hobbs, New Mexico 88240  
Reasons for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE  
Lease Name Winkler Federal Lease No. 12 Well No. Cato - San Andres Kind of Lease State, Federal or Fee Federal  
Location  
Unit Letter 0 660 Feet From The South Line and 1980 Feet From The East  
Line of Section 29 Township 8S Range 30E, NMPM, Chaves County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
Mobil Pipe Line Company Address (Give address to which approved copy of this form is to be sent)  
Box 900, Dallas, Texas (Attn: Mr. Don Kennedy)  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐  
None 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 Se Twp. Rge. Is gas actually connected? When  
X 29 8S 30 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 (X) Gas Well New Well (X) Workover Deepen Plug Back Same Restv. Diff. Restv.  
Date Spudded 12-27-67 Date Compl. Ready to Prod. 1-4-68 Total Depth 3600' P.B.T.D. 3497'  
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation San Andres Top Oil/Gas Pay 3314' Tubing Depth 3253'  
Perforations 3314-21-22-27-28-33-37-40-45-50' Depth Casing Shoe 3600'  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
12-1/4" 8-5/8"OD 276' 200 sks.  
7-7/8" 4-1/2"OD 3600' 300 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 1-4-68 Date of Test 1-5-68 Producing Method (Flow, pump, gas lift, etc.) Flow  
Length of Test 8 hrs. Tubing Pressure 200# Casing Pressure 150# Choke Size 1/4"  
Actual Prod. During Test 90 bbls. Oil-Bbls. 79 Water-Bbls. 11 Gas-MCF 33

GAS WELL  
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate  
Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure 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) Superintendent  
(Title)  
January 5, 1968  
(Date)  
OIL CONSERVATION COMMISSION  
APPROVED JAN 5 1968, 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.