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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

Robert B. Holt

Address

801 First National Bank Bldg., Midland, Texas 79701

Reason(s) for filing *(Check proper box)*

New Well **X**   Change in Transporter of:

Recompletion ☐   Oil ☐   Dry Gas ☐   Other *(Please explain)*

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	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Aztec State	2	Undesignated R-3786	State, Federal or Fee **State**	K 6109

North Baum - Upper Pennsylvanian

Location

Unit Letter **A** ; 660 Feet From The **North** Line and 660 Feet From The **East**

Line of Section 26 Township 13S Range 32E , NMPM, **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐

Permian Corporation

Address *(Give address to which approved copy of this form is to be sent)*

P.O. Box 3119, Midland, Texas 79701

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐

Warren Petroleum

Address *(Give address to which approved copy of this form is to be sent)*

Gulf Building, Midland, Texas 79701

	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
If well produces oil or liquids, give location of tanks.	A	26	13S	32E	**No**	**Immediately**

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 Res'v.	Diff. Res'v.

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
1-4-69	2-12-69	10,315'	10,265'

Elevations *(DF, RKB, RT, GR, etc.)*	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
4307.9 GR	Cough Canyon Cisco "C"	9735'	9702'

Perforations			Depth Casing Shoe
9743' – 9799' Total 14 3/8" shots			10315'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	380'	400 sx
11	8-5/8"	4060'	200 sx
7-7/8"	5-1/2"	10315'	425 sx
	2-3/8" Tbng	9702'	

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)
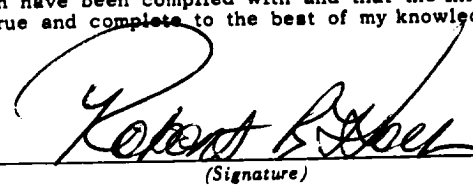
OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method *(Flow, pump, gas lift, etc.)*
2-11-69	2-12-69	**Flowing**

Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	640	Pkr.	20/64"

Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
x521x	521	–0–	270

GAS WELL
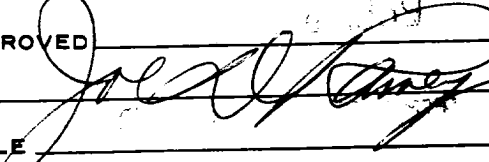
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate

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.

(Signature)

Operator

(Title)

February 19, 1969

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 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.