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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-11
Effective 1-1-65

I. Operator
Charles B. Gillespie, Jr.

Address
P.O. Box 8 Midland, TX 79702

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 State "M"	Lease No. E-2116-2	Well No. 8	Pool Name, including Formation Saunders Permo Upper Penn	Kind of Lease State, Federal or Fee State
Location				
Unit Letter P	660'	Feet From The South	Line and 660'	Feet From The East
Line of Section 3	Township 15-S	Range 33-E	, NMPM, Lea County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Amoco Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1979 Tulsa, OK 74102					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589 Tulsa, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 10	Twp. 15S	Rge. 33E	Is gas actually connected? yes	When 7/17/85

If this production is commingled with that from any other lease or pool, give commingling order number: **CTB 131**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 6/2/85	Date Compl. Ready to Prod. 7/13/85	Total Depth 10,259'	P.B.T.D. 10,083'					
Elevations (DF, RKB, RT, GR, etc.) 4185.8 GR	Name of Producing Formation Penn	Top Oil/Gas Pay 9,978'	Tubing Depth 9,867'					
Perforations 9978-9996'	Depth Casing Shoe 10,126'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8" 61#		357'		400 sx circ.			
11"	8 5/8" 24-32#		4300'		1600 sx circ			
7 7/8"	5 1/2" 17#		10126'		910 sx			
5 1/2"	2 3/8" J-55 4.7#		9867'					

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)

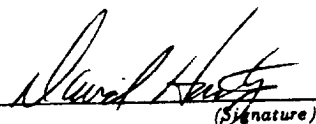
Date First New Oil Run To Tanks 7/15/85	Date of Test 7/18/85	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 Hour	Tubing Pressure 160#	Casing Pressure 0#	Choke Size 24/64"
Actual Prod. During Test 165	Oil-Bbls. 154	Water-Bbls. 11	Gas-MCF 417

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)

Engineer
(Title)

7/19/85
(Date)

OIL CONSERVATION COMMISSION
JUL 23 1985, 19____
APPROVED _____
BY **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR
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.