

**NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

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

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U.S.G.P.		
LAND OFFICE		
TRANSPORTED OIL		
	GAS	
OPERATOR		
PRORATION OFFICE		

I. OPERATOR

Operator: Sohio Petroleum Company

Address: P. O. Box 3000 Midland, TX 79702

Reasons for filing (check proper box):

New Well: Change in Transporter of:

Recompleted: Oil Dry Gas

Change in Ownership: Casinghead Gas Condensate

Other (Please explain): Name Change Only

If change of ownership give name and address of previous owner: Sohio Natural Resources Company

II. DESCRIPTION OF WELL AND LEASE

Well No. <u>1</u>	Pool Name, including Formation <u>Drinkard</u>	Kind of Lease <u>Patented</u>	Lease No. _____
Section <u>H</u>	Feet From The <u>North</u> Line and <u>880</u> Feet From The <u>East</u>	State, Federal or Fee	
Line Number <u>5</u>	Township <u>22S</u>	Range <u>37E</u>	NMPM, <u>Lea</u> County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Texas New Mexico Pipeline Company</u>	<u>P. O. Box 1510 Midland, TX 79702</u>
Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Getty Oil Company</u>	<u>P. O. Box 1650 Tulsa, OK 74102</u>
Section <u>H</u> Township <u>22S</u> Range <u>37E</u>	Is gas actually connected? <u>yes</u> When <u>July 1962</u>

IV. COMPLETION DATA

If this well is in an ingrad with that from any other lease or pool, give commingling order number: _____

Depth of Completion (ft)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reservoir	Diff. Reservoir
<u>1000</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initial Compl. Ready to Prod.	Total Depth		P.B.T.D.					
Final Compl. Ready to Prod.	Total Depth		Tubing depth					
	Depth Casing Shoe							

PIPE 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 greater than allowable for this depth or be for full 24 hours)

Length of Test	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
<u>24 hrs</u>	<u>8/5/82</u>	<u>Flow</u>	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
<u>24 hrs</u>	<u>1000</u>	<u>1000</u>	<u>1/2"</u>
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
<u>0</u>	<u>24 hrs</u>	<u>0</u>	<u>50</u>
Testing Method (pump, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
<u>Flow</u>	<u>1000</u>	<u>1000</u>	<u>1/2"</u>

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. Switzer
(Signature)
District Superintendent
(Title)
8/05/82
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 11 1982, 1982

BY JERRY SEXTON
ORIGINAL SIGNED BY
TITLE DISTRICT SUPERINTENDENT

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.

RECEIVED
JAN 16 1980
OIL CONSERVATION DIV.

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AUG 6 1982
O.C.D.
HOBBS OFFICE