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TRANSPORTER	OIL 1 GAS 1
OPERATOR	3
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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

Original Acc: NMOCC-Artesia
cc: REC, File

I. **Operator**
Sinclair Oil & Gas Company
Address
P.O. Box 1920, Hobbs, New Mexico
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter oil ☐ Other (Please explain)
Recompletion ☐ Oil ☐ Dry Gas ☐ Assumed ownership effective
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐ September 1, 1965
Also change in lease name from
MAX FRIESS to Max Friess PO
If change of ownership give name and address of previous owner **Fren Oil Co., 913 El Paso National Bank Bldg, El Paso, Tex.**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Max Friess (PO)	Well No. Pool Name, Including Formation 19 Cedar Lake Abe	Kind of Lease State, Federal or Fee Federal
Location Unit Letter I , 1650 Feet From The South Line and 990 Feet From The East Line of Section 19 , Township 17S , Range 31E , NMPM, Eddy 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"/> Midwood Corporation	Address (Give address to which approved copy of this form is to be sent) 2003 Wilco Bldg., Midland, Texas	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) Tulsa, Oklahoma	
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 19
	Twp. 17S	Rge. 31E
	Is gas actually connected? Yes	When 4-2-62

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'ty.	Diff. Res'ty.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.E.T.D.			
Pool	Name of Producing Formation		Tubing Depth					
Perforations	OCT 15 1965		Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
ARTESIA, OFFICE								

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)

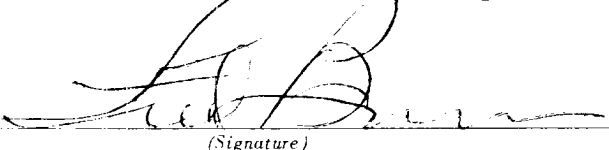
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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)

October 11, 1965
(Date)

OIL CONSERVATION COMMISSION

APPROVED **OCT 15 1965**, 19

BY **M. L. Armstrong**

TITLE **OIL AND GAS TRANSPORT**

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 Sections I, II, III, and VI only 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.