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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

I. Operator
WINDEFOR OIL COMPANY ✓

Address
1202 First National Bank Building, Fort Worth, Texas 76102

Reason(s) for filing (Check proper box) Other (Please explain)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:			
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Dry Gas	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	Condensate	<input type="checkbox"/>

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jackson "B", Tract #2	Well No. 28	Pool Name, Including Formation Grayburg Jackson-GB-SA	Kind of Lease State, Federal or Fee Federal	Lease No. NM-2747
Location Unit Letter 0 ; 660 Feet From The South Line and 1980 Feet From The East				
Line of Section 24 Township 17S Range 30E , 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"/> Texas-New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) Box #1510, Midland, Texas 79704
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) Box #1135, Eunice, New Mexico 88231
If well produces oil or liquids, give location of tanks.	Unit: D Sec.: 25 Twp.: 17S Rge.: 30E Is gas actually connected? Yes When:

If this production is commingled with that from any other lease or pool, give commingling order number: DHC #1

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 Dec. 20, 1967	Date Compl. Ready to Prod. Feb. 22, 1968	Total Depth 3220	P.B.T.D. 3188					
Elevations (DF, RKB, RT, GR, etc.) 3645 KB	Name of Producing Formation Grayburg-Premier	Top Oil/Gas Pay 3108	Tubing Depth 3090 ⁴ Packul 2296					
Perforations 3109-3177	Depth Casing Shoe 3220							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4	8-5/8"		519'		200 sx.			
7-7/8	5-1/2"		3220'		450 sx. incor			
	2 1/16"		3090					

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 Feb. 21, 1968	Date of Test Feb. 22, 1968	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls. 27	Water-Bbls. 0	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 (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.

Ralph L Gray
(Signature)
Consulting Engineer
(Title)
February 23, 1968
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 29 1968, 19____

BY W.A. Gressett

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.