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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

MAR 1 1973

O. O. O.
ARTESIAN OFFICE

CLASS OIL COMPANY
1700 2nd Street, Suite 100
America Building, Midland, Texas 79701

<input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	Other (Please explain) <i>add com to lease name</i>
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Details of ownership give name and address of previous owner

Name Permian State Com.	Well No. 1	Pool Name, including Formation Morrow	Kind of Lease State, Federal or Fee State	Lease No. K-4661
Location Unit Letter <u>K</u> 1980 Feet From The <u>South</u> Line and 1980 Feet From The <u>west</u> Section <u>18</u> Township <u>21-S</u> Range <u>26-E</u> , NMPM, <u>Eddy</u> County				

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> PERMIAN CORPORATION	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1183, HOUSTON, TEXAS 77001
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> SOUTHERN UNION GAS COMPANY	Address (Give address to which approved copy of this form is to be sent) FIDELITY UNION TOWER, DALLAS, TEXAS 75201
If well produces oil or liquids, give location of tanks. Unit <u>K</u> Sec. <u>18</u> Twp. <u>21S</u> Rge. <u>26E</u>	Is gas actually connected? <u>NO</u> When <u>4-26-73</u>

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

Designate Type of Completion - (X) Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>																				
Date Spudded <u>5-13-72</u> Date Compl. Ready to Prod. <u>8-3-72</u> Total Depth <u>10,800</u> P.B.T.D. <u>10,759</u>																				
Elevations (DF, RKB, RT, GR, etc.) <u>3310 GR</u> Name of Producing Formation <u>Morrow</u> Top Oil/Gas Pay <u>10,536</u> Tubing Depth <u>10,454</u>																				
Perforations <u>10,536-544</u> <u>10,660-673</u> <u>10,706-724</u> Depth Casing Shoe <u>10,800</u>																				
TUBING, CASING, AND CEMENTING RECORD																				
<table border="1"> <tr> <th>HOLE SIZE</th> <th>CASING & TUBING SIZE</th> <th>DEPTH SET</th> <th>SACKS CEMENT</th> </tr> <tr> <td>17 1/2</td> <td>13 3/8</td> <td>525</td> <td>450</td> </tr> <tr> <td>12 1/4</td> <td>8 5/8</td> <td>2,100</td> <td>900</td> </tr> <tr> <td>7 7/8</td> <td>5 1/2</td> <td>10,800</td> <td>380</td> </tr> <tr> <td></td> <td><u>2 7/8"</u></td> <td><u>10454</u></td> <td></td> </tr> </table>	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	17 1/2	13 3/8	525	450	12 1/4	8 5/8	2,100	900	7 7/8	5 1/2	10,800	380		<u>2 7/8"</u>	<u>10454</u>	
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Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	Date of Test Tubing Pressure Oil-Bbls.	Producing Method (Flow, pump, gas lift, etc.) Casing Pressure Water-Bbls.	Choke Size Gas-MCF
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Actual Prod. Test-MCF/D <u>7300</u>	Length of Test <u>4 hrs</u>	Bbls. Condensate/MMCF <u>-</u>	Gravity of Condensate <u>-</u>
Testing Method (pitot, back pr.) <u>Meter Run</u>	Tubing Pressure (Shut-in) <u>3486</u>	Casing Pressure (Shut-in) <u>0</u>	Choke Size <u>Meter Run</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.

W. A. Gressett
(Signature)
Manager, West Texas & SE New Mexico Prod. Div.
(Title)
FEBRUARY 28, 1973
(Date)

OIL CONSERVATION COMMISSION
MAY 1 1973

APPROVED _____, 19____
BY W. A. Gressett
TITLE OIL AND GAS INSPECTOR

This form is to be filed in compliance with RULE 1109.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a translation 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 conditions.