

DISTRIBUTION		
SANTA FE	✓	
FILE	✓	✓
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	✓
OPERATOR		✓
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
**REQUEST FOR ALLOWABLE  
AND**

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

**AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

DEC 29 1982

**I. OPERATOR**  
Operator: Kaiser-Francis Oil Company ✓  
Address: P.O. Box 35528 Tulsa, OK 74135  
Reason(s) for filing (Check proper box):  
New Well  Change in Transporter of: Oil  Dry Gas   
Recompletion  Casinghead Gas  Condensate   
Change in Ownership  Other (Please explain):

If change of ownership give name and address of previous owner: Coquina Oil Corporation P.O., Drawer 2960 Midland, TX 79702 ✓

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name: Pure Gold "A" Federal Well No.: 1 Pool Name, including Formation: West Sand Dunes-Morrow Kind of Lease: State, Federal or Fee Federal Lease No.: NM-38464  
Location: Unit Letter N : 800 Feet From The South Line and 1980 Feet From The West  
Line of Section 21 Township 23 Range 31 , N.M.P.M., Eddy County

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil  or Condensate  Address (Give address to which approved copy of this form is to be sent):  
Name of Authorized Transporter of Casinghead Gas  or Dry Gas  Address (Give address to which approved copy of this form is to be sent):  
El Paso Natural Gas Company P.O. Box 1492 El Paso, TX 79928  
If well produces oil or liquids, give location of tanks. Unit N Sec. 21 Twp. 23 Rge. 31 Is gas actually connected? Yes When February 1981

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'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, R.K.S, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE 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 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 (pilot, 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.

Jonna M. Knapp  
(Signature)

Engineering Tech  
(Title)

November 24, 1982  
(Date)

**OIL CONSERVATION COMMISSION**

JAN 04 1983

APPROVED \_\_\_\_\_, 19\_\_

BY Mark Williams

TITLE OIL AND GAS INSPECTOR

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.