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	GAS	
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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

OCT 18 8 50 AM '65

I. Operator **David Fasken**  
Address **608 First National Bank Bldg. - Midland, Texas**  
Reason(s) for filing (Check proper box) Other (Please explain)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☒ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Felmont-Collier</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>North Bagley Lower Penn</b>	Kind of Lease State, Federal or Fee <b>Fee</b>
Location Unit Letter <b>H</b> ; <b>510</b> Feet From The <b>East</b> Line and <b>1980</b> Feet From The <b>North</b> Line of Section <b>9</b> , Township <b>11S</b> Range <b>33East</b> , NMPM, 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"/> <b>Service Pipe Line Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Box 337 - Midland, Texas</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. <b>H 9 11S 33E</b>	Is gas actually connected? <b>Vented</b> When

If this production is commingled with that from any other lease or pool, give commingling order number: **No-will be applied for**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			<input checked="" type="checkbox"/>					
Date Spudded <b>June 15, 1965</b>	Date Compl. Ready to Prod. <b>Sept. 1, 1965</b>	Total Depth <b>10,325</b>	P.B.T.D. <b>10,290</b>					
Pool <b>North Bagley</b>	Name of Producing Formation <b>Lower Penn</b>	Top Oil/Gas Pay. <b>10,053</b>	Tubing Depth <b>10,290</b>					
Perforations <b>10,117 to 10,126 and 10,258 to 10,266</b>			Depth Casing Shoe <b>10,325</b>					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<b>24"</b>	<b>20"</b>		<b>40'</b>		<b>3 1/2 yards concrete</b>			
<b>17"</b>	<b>13 3/8"</b>		<b>357'</b>		<b>350</b>			
<b>12 1/4"</b>	<b>9 5/8"</b>		<b>3893'</b>		<b>600</b>			
<b>8 3/4"</b>	<b>7"</b>		<b>10,325'</b>		<b>500</b>			

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 <b>Sept. 1, 1965</b>	Date of Test <b>Sept. 1, 1965</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Swabbing</b>	
Length of Test <b>24</b>	Tubing Pressure	Casing Pressure <b>Packer</b>	Choke Size <b>Open</b>
Actual Prod. During Test <b>250 bbls. fluid</b>	Oil - Bbls. <b>190</b>	Water - Bbls. <b>60</b>	Gas - MCF <b>Not measured</b>

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.

**James B. Henry**  
(Signature)  
**Agent**  
(Title)  
**October 12, 1965**  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY **James B. Henry**  
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 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.