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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

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
The Louisiana Land and Exploration Company
Address
P. O. Box 1696, Midland, Texas
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name State 14 Well No. 1 Pool Name, including Formation Middle Lane Kind of Lease State, Federal or Fee State Lease No. E 7324
Location
Unit Letter N 660 Feet From The South Line and 1980 Feet From The West
Line of Section 14 Township 10-S Range 33-E, NMPM, Lea 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)
Pan American Petroleum Corp. (trucks) P. O. Box 1725, Midland, Texas
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
Warren Petroleum P. O. Box 1589, Tulsa, Oklahoma 74102
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When
N 14 10-S 33-E No

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 9-23-66 Date Compl. Ready to Prod. 10-30-66 Total Depth 9920 P.B.T.D. 9859
Elevations (DF, RKB, RT, GR, etc.) 4213 RKB 4200 Gr Name of Producing Formation Bough "C" Top Oil/Gas Pay 9672 Tubing Depth 9560
Perforations 9676'-9680' & 9682-9690' Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17 1/2" 13 3/8 405' 400 sxs
11 8 5/8 3975' 380 sxs
7 7/8 5 1/2 9920' 305 sxs
2 3/8 9560'

V. TEST DATA AND REQUEST FOR ALLOWABLE (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.)	
10-30-66	10-30-66	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
11.0 hrs.	550 psig.	PKR	16/64"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
309.62 Bbls fluid	234.78	74.84	258.0

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	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.

OIL CONSERVATION COMMISSION
APPROVED _____, 19____
BY _____
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.

(Signature)
Geologist
(Title)
11-4-66
(Date)