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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
PENNZOIL COMPANY
Address
1007 Midland Savings Bldg., Midland, Texas 79701
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 Harris-State	Well No. 1	Pool Name, Including Formation Undesignated	Kind of Lease State	Lease No. OG 5338
Location Unit Letter L 2086 Feet From The South Line and 554 Feet From The West Line of Section 5 Township 11 S Range 34 E , NMPM, Lea 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"/> Pan American Petro. Corp. (Trucks)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1725 - Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petro. Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589 - Tulsa, Oklahoma					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 5	Twp. 11 S	Rge. 34-E	Is gas actually connected? No	When Soon

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 <input checked="" type="checkbox"/>	Gas Well <input 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 Nov. 25, 1966	Date Compl. Ready to Prod. Jan. 9, 1967		Total Depth 9860'		F.B.T.D. 9857'			
Elevations (DF, RKB, RT, GR, etc.) 4212 KB - 4196 Gr.	Name of Producing Formation Bough "C" (Penn.)		Top Oil/Gas Pay 9836'		Tubing Depth 9855'			
Perforations 9849 + 9853					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		387		340			
11"	8-5/8"		4040		615			
7-7/8"	5-1/2"		9860		450			
	2-7/8" EUE		9855					

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 Jan. 9, 1967	Date of Test 1-12-67	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 380	Casing Pressure Packer	Choke Size 24/64"
Actual Prod. During Test 272	Oil-Bbls. 262	Water-Bbls. 10	Gas-MCF 363

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.

Charles G. Brown
(Signature)

Production Manager
(Title)

Jan. 17, 1967
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JAN 21 1967**, 19

BY **ENGINEER**

TITLE **ENGINEER**

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.