

SANTA FE		4
FILE		✓
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL GAS	✓
OPERATOR		✓
PRODUCTION OFFICE		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form 1-104
Supersedes Old C-104 and C-11
Effective 1-1-65

NOV 7 1977

D.C.G.
BARTON, OK.

Operator
E. L. LATHAM, JR. & ROY G. BARTON, JR.

Address
P.O. BOX 1392, HOBBS, NEW MEXICO 88240

Reason(s) for filing (Check proper box)
New Well ☒ Magnate
Recompletion ☐ Change in Transporter oil
Change in Ownership ☐ Oil ☐ Dry Gas ☒
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 AMOCO FEDERAL	Well No. 1	Pool Name, Including Formation SAMS RANCH GRAYBURG	Kind of Lease State, Federal or Fee FEDERAL	Lease No. NM 0223201
Location Unit Letter M : 660' Feet From The SOUTH Line and 660' Feet From The WEST Line of Section 9 Township 14 SOUTH Range 28 EAST, NMPM, CHAVES County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> PHILLIPS PIPELINE COMPANY	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? NO When

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.	Full Res'v.
		X	X					
Date Spudded 2/1/77	Date Compl. Ready to Prod. 3/18/77	Total Depth 1657'	P.D.T.D. 1657'					
Elevations (DF, RKB, RT, GR, etc.) 3568'	Name of Producing Formation GRAYBURGH PREMIER	Top Oil/Gas Pay 1651' / 623'	Tubing Depth 1657'					
Perforations OPEN HOLE 162 57	Depth Casing Shoe 1623'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
	8 5/8"	212'	100 Sx Circulated					
	5 1/2"	1623'	250 Sx Circulated					
	2 3/8" Tubing	1657'						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead 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 462 MCF	Length of Test 24 Hr.	Bbls. Condensate/MMCF None	Gravity of Condensate
Testing Method (prior, back pr.) Back Press.	Tubing Pressure (shut-in) 1290#	Casing Pressure (shut-in) 1290#	Choke Size 14/64"

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.

(Signature)

Operator

November 3, 1977

OIL CONSERVATION COMMISSION
NOV 29 1977

APPROVED _____, 19

BY
SUPERVISOR, DISTRICT II

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.