

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-1-78

RECEIVED

OCT 5 1981

O. C. D.
ARTESIA OFFICEREQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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SANTA FE	1
FILE	1
U.S.O.R.	
LAND OFFICE	
TRANSPORTER	
OIL	
GAS	
OPERATOR	
PRODUCTION OFFICE	

Operator
Fred Pool Operating Co. ✓
Address
Clovis Star Rt. Box 1300 Roswell, N.M. 88201Reason(s) for filing (Check proper box)
New Well ☐ Designate
Recompletion ☐ Change in Transporter of:
Change in Ownership ☐ Oil ☐ Dry Gas ☐
Casinghead Gas ☒ Condensate ☐If change of ownership give name
and address of previous owner

1. DESCRIPTION OF WELL AND LEASE

Lease Name	Plains State	Well No.	3	Pool Name, including Formation	E Chisum, S.A.	Kind of Lease	State, Federal or Fee	State K	Lease No.	2114
Location	Unit Letter	J	2310	Feet From The	S	Line and	2310	Feet From The	E	
Line of Section	16	Township	11S	Range	28E	NMPM,	Chaves	County		

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)											
Navajo Crude Oil - Navajo Purchasing Co.	Box 159 Artesia, N.M. 88210											
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)											
Mapco	1800 Baltimore, Tulsa, Ok 74119											
If well produces oil or liquids, give location of tanks.	Unit	J	Sec.	16	Twp.	11S	Rge.	28E	Is gas actually connected?	yes	When	9-5-81

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
Date Spudded	6-15-77	Date Compl. Ready to Prod.	9-12-77	Total Depth	2214	P.B.T.D.	open hole	
Elevations (O.S., RKB, P., GR, etc.)	3684.0 GI	Name of Producing Formation	San Andres	Top Oil/Gas Pay	2138	Tubing Depth	2138	
Perforations	Open Hole	2086-2214	Depth Casing Shoe	-				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8 5/8	297	125 sx C1 C
7 7/8	5 1/2	2086	120 sx C1 H
2 2/8		2138	-

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 oil ability for this depth or be for full 24 hours)

Date of Test	9-12-77	Producing Method (Flow, pump, gas lift, etc.)	pumping
Length of Test	24hrs.	Tubing Pressure	20#
Actual Prod. During Test	19	Casing Pressure	20#
	Oil - Bbls.	Water - Bbls.	0
		Gas - MCF	40 MCF

GAS WELL

Actual Prod. Test - MCF/D	3.65	Length of Test	24hrs.
Testing Method (pilot, back pr.)	producing	Bbls. Condensate/MMCF	19
		Gravity of Condensate	
		Tubing Pressure (Shut-in)	20#
		Casing Pressure (Shut-in)	20#
		Choke Size	open

2. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Secretary
(Signature)

9-15-81

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 9 1981

BY W. A. Gressitt
TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviator tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multi-completed wells.