

NO. OF COPIES RECEIVED	4
DISTRIBUTION	
TABLET	1
FILE	1
MAILING	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	1
PRODUCER OF FIELD	

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-101 and C-111
Effective 1-1-65

RECEIVED

AUG 15 1979

PLANET, INC. ✓

O. C. C.
ARTESIA, OFFICE

Address

P.O. BOX 31718, AMARILLO, TX 79120

Reason(s) for filing (Check proper box)

New Well	☒	Change in Transporter of:	
Recompletion	☐	Oil	☐
Change in Ownership	☐	Condensate Gas	☐
		Dry Gas	☐
		Condensate	☐

Other (Please explain)

Please assign a testing allowable of 71 barrels of oil produced while testing San Andres perms 2985-2995

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Whittenburg "G"	1	Wildcat-San Andres	State, Federal or Fee Fee	
Location				
Unit Letter	A	330 Feet From The North Line and 330 Feet From The East		
Line of Section	29	Township	10 S	Range
			29 E	N.M.S.M., Chaves

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)					
Navajo Crude Oil Purchasing Co.	P.O. Box 175 Artesia, NM 88210					
Name of Authorized Transporter of Gas/condensate Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
	M. Abbott, P.O. Box 637, Hobbs, NM 88240					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	A	29	10	29		

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 Reservoir, Different Depth
Date Spudded	Date Compl. ready to Prod.		Total Depth		P.D.T.D.		
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Testing Depth		
Perforations					Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of initial volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

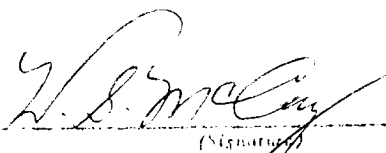
Date First New Oil Run To Tanks	Date of Test	Producing Method (if flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-SEIL	Water-in-ils.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Lbs. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pt.)	Tubing Pressure (psia-in)	Casing Pressure (psia-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.



(Signature)

Agent

(Title)

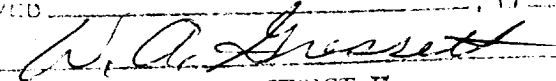
8-12-79

(Date)

OIL CONSERVATION COMMISSION

AUG 16 1979

APPROVED _____, 19

BY  SUPERVISOR, DISTRICT I

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, the Commission may recommend a reduction of the allowable if the well is not in accordance with RULE 1104.

All copies of this form must be filed out and filed with the Commission in accordance with RULE 1104.

Fill out only Sections I, II, III, and VI for change of ownership, change of name of owner, or transporter, or other such change of ownership.