

DISTRIBUTION			
MANTA FE			
FILE			
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

RECEIVED
JUN 29 1979

O. C. C.
ARTERIA, OFFICE

Operator Flains Radio Broadcasting Co. ✓	
Address 327 J P White Bldg. Roswell, N.M. 88201	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
CASINGHEAD GAS MUST NOT BE FLARED AFTER 9/1/79 ✓ UNLESS AN EXCEPTION TO IS OBTAINED Ex. 2-334	
If change of ownership give name and address of previous owner	

Lease Name L.E. Ranch 16		Well No. 8	Pool Name, including Formation E. Chisum, S A	Kind of Lease State, Federal or Fee	State	Lease No. K 2114
Location						
Unit Letter F ; 2310 Feet From The N Line and 2310 Feet From The W						
Line of Section 16 Township 11S Range 28E, NMPM, Chaves County						

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)				
Permian Corporation		Houston, Texas				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)				
none						
If well produces oil or liquids give location of tanks.	Unit B 8-28-78	Sec. 16	Twp. 11S	Pge. 28E	Is gas actually connected? no	When
If this production is commingled with that from any other lease or pool, give commingling order number:						

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X		X	X				
Date Spudded 8-28-78	Date Compl. Ready to Prod. 10-2-78	Total Depth 2317		P.B.T.D. 2272					
Elevations (DF, RKB, RT, GR, etc.) 3678 GL	Name of Producing Formation San Andres	Top Oil/Gas Pay 2147		Tubing Depth 2118					
Perforations 1/ft. at 2219, 2217, 2210, 2208, 2200, 2191, 2180, 2175, 2152, 2145				Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"		8 5/8		307		150 CL C 2% CC			
7 7/8		5 1/2		2317		150 sx, CL C 50/50 poz			

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 allowable for this depth or be for full 24 hours)			
Date First New Oil Run To Tanks 10-5-78	Date of Test 10-10-78	Producing Method (Flow, pump, gas lift, etc.) pumping-	
Length of Test 24hrs.	Tubing Pressure 15#	Casing Pressure 15#	Choke Size none
Actual Prod. During Test 22 bbls	Oil-Bbls. 20	Water-Bbls. 2	Gas-MCF

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Rente
(Signature)
Secretary
(Title)
5-29- 79
(Date)

OIL CONSERVATION COMMISSION
JUL 12 1979

APPROVED _____, 19____
BY Mike Williams
TITLE OIL AND GAS INSPECTOR

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 multiple