

DISTRIBUTION		7
ANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		1
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

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AUG 29 1979

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AUG 3 1979

O. C. C.
ARTESIA, OFFICE

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ARTESIA, OFFICE

Operator Plains Radio Broadcasting Co. ✓	
Address 327 JP White Bldg. Roswell, N.M. 88201	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input 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"/>
Other (Please explain) Ex. 2-334	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name L.E. Ranch 16	Well No. 9	Pool Name, including Formation E. Chisum, San Andres	Kind of Lease State, Federal or Fee	State	Lease No. K 2114
Location					
Unit Letter K : 2200 Feet From The S Line and 1650 Feet From The W					
Line of Section 16 Township 11S Range 28E, NMPM, Chaves 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"/> Permian corporation	Address (Give address to which approved copy of this form is to be sent) Houston, Texas	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> none	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 E B	Sec. 16
	Twp. 11S	Rge. 28E
	Is gas actually connected? 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 <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 9-7-78	Date Compl. Ready to Prod. 3-21-79		Total Depth 7115 2400		P.B.T.D. 2250			
Elevations (DF, RKB, RT, GR, etc.) 3676 Gr	Name of Producing Formation San Andres		Top Oil/Gas Pay 2091		Tubing Depth 2056			
Perforations 2091- 2200 16 shots; 2208-2218 20 shots size .41					Depth Casing Shoe 2056			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17"	13/ 3/8		315 ft.		250 sx, circulated			
11"	8 5/8		2400 ft.		200 sx,			

V. 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 4-1-79	Date of Test 4-2-79	Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24 hrs.	Tubing Pressure 18#	Casing Pressure 18#	Choke Size none
Actual Prod. During Test 22 hbbls	Oil - Bbls. 22	Water - Bbls. 0	Gas - MCF tstm

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.

Patti Pool-Janes
(Signature)

Secretary

(Title)

6-23-79

(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 30 1979
BY *W. A. Gressett*
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 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