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NEW MEXICO OIL CONSERVATION COMM. ON  
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

OCT 24 1978

Operator STEVENS OIL COMPANY ✓		O.C.C. ARTESIA, OFFICE
Address P. O. Box 2203, Roswell, New Mexico 88201		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Recompletion <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>		

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Citgo-State	Well No. 4	Pool Name, Including Formation Twin Lakes-San Andres <i>Associated</i>	Kind of Lease State, Federal or Fee	Lease No. K-2803
Location Unit Letter <u>G</u> ; <u>2310</u> Feet From The <u>North</u> Line and <u>2310</u> Feet From The <u>East</u> Line of Section <u>36</u> Township <u>8-S</u> Range <u>28-E</u> , NMPM, <u>Chaves</u> 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"/> Navajo Crude Oil Purchasing	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 175 - Artesia, New Mex. 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Stevens Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2203 - Roswell, New Mex. 88201					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 36	Twp. 8-S	Rge. 28-E	Is gas actually connected? Yes	When 10-22-78

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9-9-78	Date Compl. Ready to Prod. 10-20-78	Total Depth 2694'	P.B.T.D. 2682'					
Elevations (DF, RKB, RT, GR, etc.) 3941.6 Gr., 3947.6 KB	Name of Producing Formation San Andres	Top Oil/Gas Pay 2581'	Tubing Depth 2650'					
Perforations 2581, 82, 93, 94, 99, 2600, 01, 05, 06, 15, 16, 19, 20 w/2 spf	Depth Casing Shoe 2692'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/2"	8-5/8"	40'	2 yds. circ.					
7-7/8"	4-1/2"	2694'	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 10-22-78	Date of Test 10-22-78	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test 112	Oil-Bbls. 90	Water-Bbls. 22	Gas-MCF N/A

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.

Donald G. [Signature]  
(Signature)  
Owner  
(Title)  
11-23-78  
(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 26 1978, 19  
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 multiply completed wells.