

DISTRIBUTION			
ANTA 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-1
Effective 1-1-65

RECEIVED

JUN 29 1979

I. Operator
Plains Radio Broadcasting Co. ✓
Address 327 J.P. White Bldg.
Roswell N.M. 88201
Reason(s) for filing (Check proper box)
New Well ☒ Change In Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change In Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
CASINGHEAD GAS MUST NOT BE
FLARED AFTER 9-1-79 ✓
UNLESS AN EXCEPTION TO Rule 30.6
IS OBTAINED
Ex. 3-334
O.C.C.
ARTESIA, OFFICE

II. DESCRIPTION OF WELL AND LEASE

Lease Name L.E. Ranch 16	Well No. 10	Pool Name, Including Formation E. Chisum, San Andres	Kind of Lease State, Federal or Fee State	Lease No. K2114
Location Unit Letter I ; 1650 Feet From The S Line and 990 Feet From The E 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 Corp.	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 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 3-20-79	Date Compl. Ready to Prod. 4-10-79		Total Depth 2318		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 3690 GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 2234-2254		Tubing Depth 2150			
Perforations 1/ft. 2234-2254					Depth Casing Shoe 2318			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11 "	8 5/8		280 Ft.		150 sx Class C			
7 7/8"	5 1/2		2318 Ft.		125 sx 50/50 poz			
		278"		2150				

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 6-1-79	Date of Test 6-1-79	Producing Method (Flow, pump, gas lift, etc.) Pumping traveling barrel	
Length of Test 24 hrs.	Tubing Pressure 24#	Casing Pressure 17#	Choke Size none
Actual Prod. During Test	Oil - Bbls. 20 bbls	Water - Bbls. 2 bbls.	Gas - MCF 40 MCF

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.


(Signature)

Secretary

6-28-79

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 19 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