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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Superseded by C-104 and C-11
Effective 1-85
RECEIVED BY
SEP 20 1984
O. C. D.
ARTESIA, OFFICE

Operator

SANDCO OIL AND GAS INC. ✓

Address

P.O. Box 881 Mesilla Park, New Mexico 88047

Reason(s) for filing (Check proper box)

New Well ☐

Recompletion ☐

Change in Ownership ☐

Change in Transporter of:

Oil ☐

Casinghead Gas ☐

Dry Gas ☐

Condensate ☐

Other (Please explain)

GAS CONNECTED

If change of ownership give name
and address of previous owner

1. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
SANDCO	2	Twin Lakes, San Andres	State, Federal or Fee Fee	
Location				
Unit Letter		Feet From The	Line and	Feet From The
G	1650	East	2310	North
Line of Section	Township	Range		County
25	8 South	28 East	NMPM, Chaves	

2. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Navajo Crude Oil Purchasing Co.	P.O. Box 159 Artesia, N.M. 88210			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Liquid Energy Corporation	P.O. Box 4000, The Woodlands, Texas 77380			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
	G	25	8S	28E
	Is gas actually connected?		When	
	Yes		March 26, 1984	

If this production is commingled with that from any other lease or pool, give commingling order number: ---

3. COMPLETION DATA

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	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
2-3-84	3-6-84		2700ft.		2700			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3941.61 GR	San Andres		2491		2610			
Perforations					Depth Casing Shoe			
2 holes 2574, 2 at 2575, 1 hole 2583, 84, 85. 4 at 2491					2700ft			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	5 5/8		125'		6yds			
7 7/8	4 1/2		2700		200 sks.			
	2 3/8		2610					

4. 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 all-able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
3-3-84	3-14-84	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	0	---	---
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
5.35 Bls.	10	38	85.5

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

5. 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)

President/Operator

(Title)

9/19/84

(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 20 1984, 19

BY Original Signed By

Leslie A. Clements

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 deeper well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of oil well name or number, or transporter, or other such change of condition.