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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
JAN 21 1970

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

O. C. C.
ARTESIA, OFFICE

Operator Dalport Oil Corporation	
Address 3471 First Natl Bank Building, Dallas, Texas 75202	
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"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Spurck-State	Well No. 8	Pool Name, Including Formation Double L - Queen	Kind of Lease State, Federal or Fee	Lease No. B-10418-78
Location				
Unit Letter P	330	Feet From The South	Line and 330	Feet From The East
Line of Section 36	Township 14S	Range 29E	, 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) Box 3119 Midland, 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 H-J	Sec. 36
	Twp. 14	Rge. 29
	Is gas actually connected? No	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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-12-70	Date Compl. Ready to Prod. Jan. 18, 1970		Total Depth 2010		P.B.T.D. 1971			
Elevations (BF, RKB, RT, GR, etc.) 3854	Name of Producing Formation Queen		Top Oil/Gas Pay 1935.5		Tubing Depth 1900			
Perforations 1935.5 - 40 1941-44					Depth Casing Shoe 2008			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8 5/8		328		175 Sx			
7 7/8	5 1/2		2008		300 Sx			
	2 3/8		1900					

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)

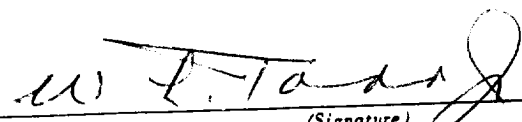
Date First New Oil Run To Tanks Jan. 19, 1970	Date of Test Jan. 20, 1970	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 3 hrs	Tubing Pressure 100	Casing Pressure 450	Choke Size 20/64
Actual Prod. During Test 15 bbls	Oil-Bbls. 15 bbls	Water-Bbls. 0	Gas-MCF -

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)
President
(Title)
Jan 20th, 1970
(Date)

OIL CONSERVATION COMMISSION
JAN 21 1970

APPROVED _____, 19____
BY **W. A. Gressett**
TITLE **OIL AND GAS INSPECTION**

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.