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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
RECEIVED

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

FEB 7 1973

I. Operator **D.C.C.**
Dalport Oil Corporation **ARTICIA OFFICE**
Address **3471 First National Bank Bldg., Dallas, Texas 75202**
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☒
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Falgout-Federal	Well No. 1	Pool Name, Including Formation Double L-Queen Associated	Kind of Lease State, Federal or Fee NM-	Lease No. 0493690
Location Unit Letter G ; 1980 Feet From The North Line and 1980 Feet From The East Line of Section 35 Township 14S Range 29E , NMPM, Chaves County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" 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	Sec.	Twp.	Rge.	Is gas actually connected?	When
					No	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 12-11-72	Date Compl. Ready to Prod. 1-18-73		Total Depth 1950		P.B.T.D. 1903			
Elevations (DF, RKB, RT, GR, etc.) 3872 KB	Name of Producing Formation Queen		Top Oil/Gas Pay 1865		Tubing Depth 1845.5 g.m.			
Perforations 1856 - 62 1/2 , 1965 - 68 25 Holes					Depth Casing Shoe 1947			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11	8 5/8		260		150 Sx "C" 2% C.C.			
7 7/8	4 1/2		1947		Circ.			
	2 3/8		1845.5 g.m.		175 Sx lite 100 Sx "C"			
					50% Poz, 2% gel			

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)

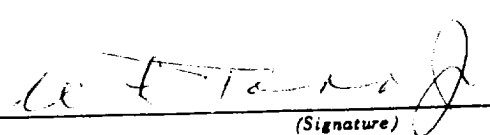
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1,018	Length of Test 3 1/2 Hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Multi-Point	Tubing Pressure (shut-in) 480 #	Casing Pressure (shut-in) 470 #	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)
January 30, 1973
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
TITLE _____

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.