

DISTRIBUTION			
ANTA FE			
ILE			
S.G.S.			
AND 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

JUL 24 1975

I. Operator **Dalport Oil Corp.** ✓
Address **3471 First National Bank Bldg., Dallas, TX 75202**
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 9-13-75 UNLESS AN EXCEPTION TO Rule 306 IS OBTAINED**
If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Todhunter-Federal	Well No. 2	Pool Name, including Formation Lucky Lake-South Queen	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter E ; 1980 Feet From The north Line and 660 Feet From The west Line of Section 22 Township 15S 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 Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, TX 77001					
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 E/F	Sec. 22	Twp. 15	Rge. 29	Is gas actually connected? no	When indefinite

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 7-1-75	Date Compl. Ready to Prod. 7-15-75		Total Depth 1875		P.B.T.D. 1831			
Elevations (DF, RKB, RT, GR, etc.) 3832 gr	Name of Producing Formation Queen		Top Oil/Gas Pay 1859		Tubing Depth 1747 D/MA, g.m.			
Perforations 1859 1/2 - 71					Depth Casing Shoe 1872			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 11 7 7/8	CASING & TUBING SIZE 8 5/8-20#-used 4 1/2-10.5#-new 2 3/8-4.7#-new		DEPTH SET 255 1872 1733.55 + 13.22' M.A.		SACKS CEMENT 175 ex 10, 27 c.c. 125 ex 110, 150 ex 110			

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 7-13-75	Date of Test 7-14-75	Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24 hours	Tubing Pressure -----	Casing Pressure	Choke Size -----
Actual Prod. During Test 19	Oil - Bbls. 18	Water - Bbls. 1	Gas - MCF 15.8

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.

Ken M. Sampson
(Signature)
geologist
(Title)
July 21, 1975
(Date)

OIL CONSERVATION COMMISSION
JUL 25 1975
APPROVED _____, 19____
BY *W.A. Gussert*
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 well to multiple