

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	
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: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐
Recompletion ☐	
Change in Ownership ☐	
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 Toohunter-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 ☒ or Condensate ☐ 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 ☐ or Dry Gas ☐ 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 ☒	Gas Well	New Well ☒	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 1759 1859	Tubing Depth 1747 L/M.A., g.m.					
Perforations 1859 1/2-71 1759 1/2-71	Connected		Depth Casing Shoe 1872					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE 11 7 7/8	CASING & TUBING SIZE 8 5/8-28 1/2-used 4 1/2-10.5 1/2-new 2 3/8-4 7/8-new	DEPTH SET 255 1872 1733.55 + 13.22 M.A.	SACKS CEMENT 175 sk 100, 2 1/2 o.o. 125 sk lite, 150 sk 110
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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.

Don McManis
(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 in multiple

N. M. O. C. C.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See instructions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☒	GAS WELL ☐	DRY ☐	Other ☐		
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐
2. NAME OF OPERATOR						RECEIVED JUL 28 1975 A. C. C. ARTESIA, OFFICE	
3. ADDRESS OF OPERATOR							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*							
At surface 1980' FW & 660' FWL						5. LEASE DESIGNATION AND SERIAL NO. NM 0557563	
At top prod. interval reported below same							
At total depth same							
14. PERMIT NO.						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
DATE ISSUED						7. UNIT AGREEMENT NAME	
15. DATE SPUDDED						8. FARM OR LEASE NAME	
16. DATE T.D. REACHED						9. WELL NO.	
17. DATE COMPL. (Ready to prod.)						10. FIELD AND POOL, OR WILDCAT	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)*						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA	
19. ELEV. CASINGHEAD						22-15S-29E	
20. TOTAL DEPTH, MD & TVD						12. COUNTY OR PARISH	
21. PLUG, BACK T.D., MD & TVD						13. STATE	
22. IF MULTIPLE COMPL., HOW MANY*						Chaves NM	
23. INTERVALS DRILLED BY						14. FIELD AND POOL, OR WILDCAT	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*						15. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA	
25. WAS DIRECTIONAL SURVEY MADE						26. COUNTY OR PARISH	
27. WAS WELL CORED						27. STATE	
28. TYPE ELECTRIC AND OTHER LOGS RUN						28. COUNTY OR PARISH	
29. CASING RECORD (Report all strings set in well)						29. STATE	
30. LINER RECORD						30. COUNTY OR PARISH	
31. TUBING RECORD						31. STATE	
32. PERFORATION RECORD (Interval, size and number)						32. COUNTY OR PARISH	
33. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.						33. STATE	
34. PRODUCTION						34. COUNTY OR PARISH	
35. LIST OF ATTACHMENTS						35. STATE	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records						36. COUNTY OR PARISH	
37. SIGNED						37. STATE	
38. TITLE						38. COUNTY OR PARISH	
39. DATE						39. STATE	

* (See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Recent- Quaternary	0	251	Red beds, red shale, Anhydrite	Rustler	251	251
Rustler	251	277	Anhydrite, red shale	Salado	277	277
Salado	277	902	salt, anhydrite	Tansil	902	902
Tansil	902	1025	Anhydrite, salt	Yates	1025	1025
Yates	1025	1158	Red sand & shale, salt, anhydrite	Seven Rivers	1158	1158
Seven Rivers	1158	1875	Red & gray sand, anhydrite, dolomite, salt			