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TRANSPORTER	OIL	
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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-110  
Effective 1-1-65

RECEIVED  
JUN 15 1966  
O. C. C.  
ARTESIA, OFFICE

I. Operator  
**Samedan Oil Corporation**  
Address  
**2207 Wilco Building, Midland, Texas**  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐  
Recompletion ☒ Casinghead Gas ☐ Condensate ☐  
Change in Ownership ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE  
Lease Name **Walker State** Well No. **2** Pool Name, Including Formation **Empire Yates 7 Rivers, East** Kind of Lease **State, Federal or Fee State**  
Location  
Unit Letter **0** ; **330** Feet From The **South** Line and **1650** Feet From The **East**  
Line of Section **27** , Township **17-S** Range **28-E** , NMPM, **Eddy** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
**Continental Pipe Line Co.** Address (Give address to which approved copy of this form is to be sent)  
**Drawer 410, Artesia, New Mexico**  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
**Phillips Petroleum Corp.** Address (Give address to which approved copy of this form is to be sent)  
**Room B-2 Phillips Bldg., Odessa, Texas**  
If well produces oil or liquids, give location of tanks. Unit **0** Sec. **27** Twp. **17-S** Rge. **28-E** Is gas actually connected? **Yes** When **June 1, 1966**

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) **X** Oil Well ☒ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☒ Same Res'v. ☐ Diff. Res'v. ☒  
Date Spudded Date Compl. Ready to Prod. Total Depth **2080** P.B.T.D. **2013**  
Pool **Empire Yates 7 Rivers, East** Name of Producing Formation **7 Rivers** Top Oil/Gas Pay **821'** Tubing Depth **973'**  
Perforations **821', 826', 832', 835', 842', 846'** Depth Casing Shoe **2078'**  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE **8"** CASING & TUBING SIZE **5 1/2"** DEPTH SET **2078'** SACKS CEMENT **584**  
**Cement circulated to surface on 5 1/2' - no other casing set.**

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 **6-1-66** Date of Test **6-1-66** Producing Method (Flow, pump, gas lift, etc.) **Pumping**  
Length of Test **24 Hrs.** Tubing Pressure Casing Pressure Choke Size  
Actual Prod. During Test **Yes** Oil-Bbbls. **7.32** Water-Bbbls. **Trace** Gas-MCF **12.6**

GAS WELL  
Actual Prod. Test-MCF/D Length of Test Bbbls. Condensate/MMCF Gravity of Condensate  
Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure 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.  
**Division Production Superintendent**  
**June 10, 1966**  
OIL CONSERVATION COMMISSION  
APPROVED **JUN 15 1966**, 19  
BY **M. L. Armstrong**  
TITLE **OIL AND GAS INSPECTOR**  
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 Sections I, II, III, and VI only 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.

