

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE
LAND OFFICE
TRANSPORTER
OPERATOR
PRODUCTION 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-110
Effective 1-1-65

RECEIVED

OCT 11 1968

Operator
Address
Request for Allowable (Check proper box)
New Well ☐ Change in Transporter oil ☐ Other (Please explain)
Redemption ☐ Oil ☐ Dry Gas ☐ Well to Central Battery and to
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐ Show Split Casinghead Connection

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE
Well No. Pool Name, Including Formation Kind of Lease Lease No.
West Henshaw Premier Unit 1 Henshaw Graybody West State, Oklahoma Fee OG-748
Location
Unit Letter L 4620 Feet From The South Line and 660 Feet From The West
Line of Section 2 Township 14S Range 30E, NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
Continental Pipeline Company North Freeman Ave., Atlatia, New Mexico
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Co. 7195 Box 8505, Okessa, Texas
Stelly Oil Company 2925 San 1650 Tulsa, Oklahoma
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When
L S 14S 30E Yes 5-2-60

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)
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.
Elevations (OF, RNB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

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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 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-MMCF
Actual Prod. Test-MMCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate
Testing Method (piston, back pr.) Tubing Pressure (Gauge-24) Casing Pressure (Gauge-24) 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
Date
OIL CONSERVATION COMMISSION
APPROVED OCT 14 1968
BY W. A. Gressett
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 logs taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allow-
able 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.