

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-111
Effective 1-1-65

RECEIVED

DEC 1 1966

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AMADARKO PRODUCTION COMPANY

P. O. Box 9317, FORT WORTH, TEXAS

Reasons for filling (Check proper box)

Change in Transporter of:
Oil ☐ Dry Gas ☐
Oxidizing Gas ☐ Condensate ☐

Other (Please explain)

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

WESTERN OIL FIELDS, INC., P. O. Box 1137, HOBBS, NEW MEXICO

II. DESCRIPTION OF WELL AND LEASE

Well No. Pool Name, including Formation Kind of Lease
1 SQUARE LAKE GRAYBURG S.A. State, Federal or Fee FEDERAL
Location
East Line 660 Feet From The N Line 660 Feet From The W
Line of Section 21 Township 16S Range 31E EDDY County

III. DESIGNATION OF AUTHORITY OF OIL AND GAS

Name of Authority Transporter of Oil or Condensate
CONTINENTAL
Name of Authority Transporter of Oxidizing Gas or Dry Gas
Address (Give address to which approved copy of this form is to be sent)
P. O. Box 567, ARTESIA, NEW MEXICO
Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give formation of same Unit Sec. Twp. Rng. Is gas actually connected? When
2F 3 16 3 NO

IV. COMPLETION RECORD

Designate Type of Completion - (1) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'ty. Diff. Res'ty.
Date Comp. Ready to Prod. Total Depth P.B.T.D.
Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations Depth Casing Shoe
HOLE SIZE CASING & TUBING S.I.D. DEPTH SET SACKS CEMENT

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 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 TEST
Actual Prod. Time-MCF/Lb. Length of Test Bbls. Condensate/MMCF Gravity of Condensate
Testing Method (Flow, gas lift, etc.) Tubing Pressure Casing Pressure Choke Size

CERTIFICATE OF COMPLIANCE

Hereby certify that the laws 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.

J. N. Chaffin
Prod. Records Super
12/14/66

OIL CONSERVATION COMMISSION

APPROVED DEC 2 1966, 19

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 deviated 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 well name or number, or transporter or other such change of name.

Separate Forms C-104 must be filed for each pool in any completed well.