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| TRANSPORTER | OIL | 1 |
| | GAS | 1 |
| OPERATOR | | 4 |
| 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-110
Effective 1-1-65

RECEIVED

MAY 13 1965

O. C. C.
ARTESIA, OFFICE

I. Operator
Gross, Kincheloe & Cook

Address
813 Petroleum Bldg. Roswell, New Mexico

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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | |
|-------------------------------|------------|---|----------------|
| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease |
| Southern Union Federal | 2 | Undesignated East Red Lake Q. Lbr. | Federal |
| Location | | | |
| Unit Letter | | Feet From The | Line and |
| M | 600 | South | 420 |
| Line of Section | | Township | Range |
| 26 | | 16S | 28E |
| | | NMFM, | Eddy |
| | | County | |

III. 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) |
| McCook Corporation | <input checked="" type="checkbox"/> | Midland, Texas |
| 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 Company | <input type="checkbox"/> | Bartlesville, Oklahoma |
| If well produces oil or liquids, give location of tanks. | Unit | Sec |
| | 1 | 28E |
| | Trac | Range |
| | 1 | 28E |
| | Is gas actually connected? | When |
| | Yes | 1-1-65 |

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. |
| 3-31-65 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | | | | | |
| Date Completed | Date Ready to Prod. | Total Prod. | P.B.T.D. | | | | | |
| 5-10-65 | | 1619 | | | | | | |
| Undesignated | Name of Producing Formation | Top of Gas Pay | Tubing Depth | | | | | |
| | Penrose | 1550 | 1598 | | | | | |
| Open hole | 1535-1619 | Depth Casing Shoe | | | | | | |
| 1535 | | | | | | | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|--------------|--------------|-------------|--------------|
| CASING SIZE | TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 8 1/8 | 5 1/2 | 1535 | 150 |
| | 2" | 1598 | |
| | | | |
| | | | |

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 Prod. To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| 5-2-65 | 5-2-65 | Flow | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| 2 hrs | | 100 | 100 |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas-MCF |
| 561 + 300 MCF | 1 | | 0 |

GAS WELL

| | | | |
|----------------------------------|-----------------|-----------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. 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.

Walter C. Gross
(Signature)
Operator
(Title)
5-11-65
(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAY 13 1965**, 19
BY **ML 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.