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	GAS	
OPERATOR		
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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

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DEC 21 1965

O. C. C.
ARTESIA, OFFICE

I. Mercury Production Company

Address: 1522 Fort Worth National Bank Building, Fort Worth, Texas 76102

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Well No.	1	Pool Name, Including Formation	Grayburg-Jackson (Queen-Gbr-SA)	Kind of Lease	State, Federal or Fee	State
Location	Constate					
Unit Letter	D	Feet From The	660 North Line and	660 Feet From The	West	
Line of Section	36	Township	16S	Range	31E	NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<u>Continental Pipeline Company</u>	<u>Artesia, New Mexico</u>					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<u>None</u>						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range.	Is gas actually connected?	When
	D	36	16S	31E	No	-

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.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
<u>September 21, 1965</u>	<u>October 14, 1965</u>		<u>3995'</u>		<u>3992'</u>			
Pool	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
<u>Grayburg-Jackson</u>	<u>Queen-Grayburg-San Andres</u>		<u>3339'</u>		<u>3960'</u>			
Perforations <u>3339' to 3342' (3 holes), 3381-1/2' to 3383-1/2' (2 holes), 3684-1/2' to 3685-1/2' (2 holes), 3734' to 3737' (3 holes), 3777' to 3781-1/2' (5 holes), 3812' to TUBING, CASING, AND CEMENTING RECORD 3834' (7 holes), and 3950' to 3954' HOLE SIZE (4 holes).</u>			DEPTH SET		SACKS CEMENT			
<u>15"</u>			<u>13-3/8" O.D.</u>		<u>30'</u>			
<u>7-7/8"</u>			<u>4-1/2" O.D.</u>		<u>3994'</u>			
<u>4"</u>			<u>2-3/8" O.D.</u>		<u>3960' (Tubing)</u>			
					<u>3 yards ready mix</u>			
					<u>400 sacks - 300 sacks</u>			
					<u>around shoe and 100 sacks</u>			
					<u>spotted behind casing</u>			
					<u>at 1000'.</u>			

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.)	
<u>October 14, 1965</u>	<u>November 11, 1965</u>	<u>Pump - 2" x 1-1/2" x 10' Cup and Ring Pump</u>	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
<u>24 hours</u>	<u>--</u>	<u>--</u>	<u>--</u>
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	<u>2.07</u>	<u>5.00</u>	<u>Nil</u>

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.

C.W. Jankhoff
(Signature)

Manager of Operations
(Title)

December 18, 1965
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 21 1965

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.

Supersede Form C-104 must be filed for each pool in which completed well.