

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
R E C E I V E D

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

JUN 18 1971

I. Operator **Pennzoil United, Inc.** **ARTESIAN OFFICE**

Address **P. O. Drawer 1828 - Midland, Texas 79701**

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) **to sell 273 barrels of Condensate produced while testing**

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name **Aid-State Com** Well No. **1** Pool Name, including Formation **Wildcat - Morrow** Kind of Lease **State** Lease No. **K-3630**

Location

Unit Letter **A** : **660** Feet From The **North** Line and **660** Feet From The **East**

Line of Section **24** 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 ☒ **The Permian Corporation** Address (Give address to which approved copy of this form is to be sent) **P. O. Box 1183 - Houston, Texas 77001**

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ **Transwestern Pipeline Company** Address (Give address to which approved copy of this form is to be sent) **P. O. Box 2521 - Houston, Texas 77001**

If well produces oil or liquids, give location of tanks. Unit **A** Sec. **24** Twp. **17-S** Rge. **28-E** Is gas actually connected? **No** When **Soon**

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.
Date Spudded 2-26-71	Date Compl. Ready to Prod. 4-2-71	Total Depth 10,796'	P.B.T.D. 10,752'					
Elevations (DF, RKB, RT, GR, etc.) 3727' KB	Name of Producing Formation Morrow	Top Oil/Gas Pay 10,608'	Tubing Depth 10,710'					
Perforations 10,608' - 10,707'			Depth Casing Shoe 10,796'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	420	250
11 3/4"	8 5/8"	1,982	250
7 7/8"	5 1/2"	10,796'	1,000
	2 3/8"	10,710'	

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 WELL

* 273 bbls. produced while testing and completing.

Actual Prod. Test-MCF/D 2,496	Length of Test 4 hrs	Bbls. Condensate/MMCF 17.5 *	Gravity of Condensate 53.5 @ 60°
Testing Method (pitot, back pr.) Back pressure test	Tubing Pressure (shut-in) 3112	Casing Pressure (shut-in) Packer	Choke Size Various

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.

J. C. Raney
(Signature)
Petroleum Engineer
(Title)
June 17, 1971
(Date)

OIL CONSERVATION COMMISSION
JUN 18 1971
APPROVED _____, 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 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 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 multi-