

DISTRIBUTION	5	
ANTA FE		
ILE		
S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

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

MAY 16 1974

I. Operator
Western Oil Producers Inc.
Address
Box 2055 Roswell, N.M.
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

25460 7-1-77
Eagle Creek Panna Pennsylvanian

II. DESCRIPTION OF WELL AND LEASE

Lease Name FLINT	Well No. #1	Pool Name, Including Formation W.C. Wildcat Cisco	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Unit Letter L ; 1980 Feet From The SOUTH Line and 660 Feet From The WEST Line of Section 25 Township 17 S Range 25E , NMPM, EDDY County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> NAVAJO CRUDE OIL PURCH C.O	Address (Give address to which approved copy of this form is to be sent) ARTESIA, NEW MEXICO 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> TRANSWESTERN PIPELINE COMPANY	Address (Give address to which approved copy of this form is to be sent) BOX 2521 HOUSTON, TEXAS					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 25	Twp. 17S	Rge. 25E	Is gas actually connected? YES	When 5-16-74

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'
		X	X					
Date Spudded 2-4-74	Date Compl. Ready to Prod. 4-18-74	Total Depth 8507	P.B.T.D. 6567					
Elevations (DF, RKB, RT, GR, etc.) DF 3482	Name of Producing Formation CISCO	Top Oil/Gas Pay 6480	Tubing Depth 6436					
Perforations 6480-6490 . 6532-6534			Depth Casing Shoe 6573					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	12 3/4"	31#	595 FT		500 SX			
K 12 1/4"	8 5/8"	24#	1189 FT		750 SX			
7 7/8"	4 1/2"	12.6 & 11.6	6573 FT		150 SX			
	278"		6436					

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)

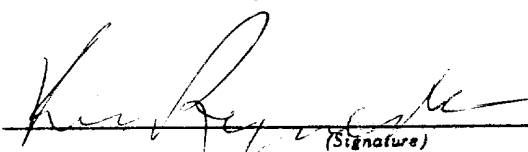
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.) FLOWING	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 2476	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

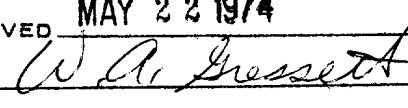
Actual Prod. Test-MCF/D 2476	Length of Test 4HRS	Bbls. Condensate/MMCF NOT MEASURED	Gravity of Condensate 44
Testing Method (pilot, back pr.) BACK PRESSURE	Tubing Pressure (Shut-in) 1628	Casing Pressure (Shut-in) 0 Packer	Choke Size 16/64"

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)
Supt.
(Title)
5-16-74
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 22 1974
BY 
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 well to be drilled.