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LAND OFFICE	
TRANSPORTER	OIL / GAS /
OPERATOR	/
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

APR 9 1980

O. C. D.
ARTESIA OFFICE

Operator WILLIAM N. BEACH	
Address BOX 3669, Midland, TX 79702	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico State "36"	Well No. 4	Pool Name, including Formation E. Red Lake-Penrose	Kind of Lease State, Federal or Fee State	Lease No. L-1603
Location				
Unit Letter C	1980	Feet From The West	Line and 660	Feet From The North
Line of Section 36	Township 16-S	Range 28-E	, 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"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1183, Houston, TX 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum	Address (Give address to which approved copy of this form is to be sent) 100 Pioneer Bldg. Bartlesville, OK 74004					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 36	Twp. 16-S	Rge. 28-E	Is gas actually connected? YES	When 4-1-80

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 XXX	Gas Well XXXX	New Well XXXX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded 2-2-80	Date Compl. Ready to Prod. 4-1-80		Total Depth 1752		P.B.T.D. 1747			
Elevations (DF, RAB, RT, GR, etc.) DF 3611.7	Name of Producing Formation Penrose		Top Oil/Gas Pay 1650 / 1656		Tubing Depth			
Perforations 1656-75					Depth Casing Shoe 1751			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11	8-5/8"-20#	325	170sx "C" 2% CaCl
8	4-1/2"-10.5#	1751	175Sx "C" 50/50 po
	2-3/8"-4.7#	1648	mi

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 4-2-80	Date of Test 4-1-80	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 60	Casing Pressure 240	Choke Size 16.64
Actual Prod. During Test	Oil-Bbls. 12.0	Water-Bbls. 1.0	Gas-MCF 33.4

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	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.

Carl C. Beach
(Signature)

Landman
4-7-80
(Title)

(Date)

OIL CONSERVATION COMMISSION
APR 25 1980

APPROVED

BY

TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells 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-completed wells.