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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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MAR 28 1966

Operator <b>FRANKLIN, ASTON &amp; FAIR, INC.</b>	
Address <b>P. O. Box 1090, Roswell, New Mexico 88201</b>	
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

Lease Name <b>Brigham H</b>	Lease No. <b>LC 029342(h)</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>Grayburg-Jackson</b>	Kind of Lease State, Federal or Fee <b>Federal</b>
Location				
Unit Letter <b>L</b> ; <b>2340</b> Feet From The <b>South</b> Line and <b>330</b> Feet From The <b>West</b>				
Line of Section <b>21</b> Township <b>17S</b> Range <b>30E</b> , NMPM, <b>Eddy</b> 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)					
<b>The Permian Corporation</b>	<b>P. O. Box 3119, Midland, Texas</b>					
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)					
<b>Skelly Oil Company</b>	<b>P. O. Box 1650, Tulsa, Oklahoma</b>					
If well produces oil or liquids, give location of tanks.	Unit <b>E</b>	Sec. <b>21</b>	Twp. <b>17S</b>	Rge. <b>30E</b>	Is gas actually connected? <b>No</b>	When <b>Approx. one week</b>

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen <input checked="" type="checkbox"/>	Plug Back	Same Res'v.	Diff. Res'v.
Date <del>3-19-66</del> Deepening commenced <b>2-16-66</b>	Date Compl. Ready to Prod. <b>3-19-66</b>	Total Depth <b>3457'</b>		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.) <b>3651' KB</b>	Name of Producing Formation <b>San Andres</b>		Top Oil/Gas Pay <b>2723'</b>		Tubing Depth <b>2681'</b>			
Perforations <b>One Shot per Foot: 2723', 2735', 2789', 2818', 2865', 2876', 2935', 2959', 3217', 3235', 3289', 3305', 3315', 3335', 3351', 3363', 3377', and 3389'</b>					Depth Casing Shoe <b>3457'</b>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<b>10"</b>	<b>8 5/8"</b>		<b>625'</b>		<b>50 sacks</b>			
<b>8"</b>	<b>7"</b>		<b>1601'</b>		<b>100 sacks</b>			
<b>6 5/8"</b>	<b>4 1/2"</b>		<b>3457'</b>		<b>275 sacks</b>			
	<b>2 3/8"</b>		<b>2681'</b>					

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 <b>3-19-66</b>	Date of Test <b>3-20-66</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pumping</b>	
Length of Test <b>24</b>	Tubing Pressure <b>20#</b>	Casing Pressure <b>20#</b>	Choke Size <b>None</b>
Actual Prod. During Test <b>98</b>	Oil-Bbls. <b>52</b>	Water-Bbls. <b>46 Load Water</b>	Gas-MCF <b>80</b>

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.

Tom P. Stephens  
(Signature)  
**Office Manager**  
(Title)  
**March 24, 1966**  
(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAR 28 1966**, 19  
BY R. L. Starnes  
TITLE Field Supervisor

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 multiply completed wells.