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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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MAY 17 1974

| | | | | | |
|--|--------------------------|---|-------------------------------------|-----------------------------------|--|
| Operator | | Armer Oil Company | | O. C. C. | |
| Address | | 2110 Continental National Bank Bldg., Fort Worth, Texas 76102 | | | |
| Reason(s) for filing (Check proper box) | | Change in Transporter of: | | Other (Please explain) | |
| New Well | <input type="checkbox"/> | Oil | <input checked="" type="checkbox"/> | Change of transporter from NCO to | |
| Recompletion | <input type="checkbox"/> | Casinghead Gas | <input type="checkbox"/> | NRC effective 1/18/74. | |
| Change in Ownership | <input type="checkbox"/> | Dry 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 | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
| General Americal Federal | 1 | Grayburg-Jackson | State, Federal or Fee Federal | NM- |
| Location | | | | |
| Unit Letter | C | 330 Feet From The North Line and | 1980 Feet From The West | 0558579 |
| Line of Section | 35 | Township | 17S | Range |
| | | | 30E | 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) | | | |
| Navajo Refining Company | Box 159, Artesia, New Mexico 88210 | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | |
| Continental Oil Co. | Box 2197, Houston, Texas 77001 | | | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Rge. |
| | C | 35 | 17S | 30E |
| Is gas actually connected? | Yes | When | 10-12-73 | |
| | | | January 18, 1974 | |

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 | Date Compl. Ready to Prod. | | Total Depth | | | P.B.T.D. | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | | Tubing Depth | | |
| Perforations | | | | | | Depth Casing Shoe | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | | SACKS CEMENT | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas - MCF |

GAS WELL

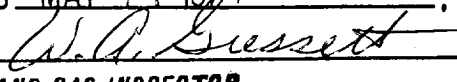
| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure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


(Signature)
Production Manager
(Title)
May 13, 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 17 1974, 19
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 Form C-104 must be filed for each well to maintain