

OIL CONSERVATION DIVISION
P. O. BOX 2088
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Form C-104
Revised 10-1-78

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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PROMOTION OFFICE	

Mrs. J.D. Jones

Address
1915 30th Street - Lubbock, Texas 79411

Reason(s) for filing (Check proper box)

New Well ☐
Recompletion ☐
Change in Ownership ☒

Change in Transporter of:
Oil ☐
Casinghead Gas ☐

Dry Gas ☐
Condensate ☐

Other (Please explain)

Effective Date - 04-26-83

If change of ownership give name and address of previous owner LATCH OPERATIONS - P.O. Box 10108, Lubbock, Texas 79408

DESCRIPTION OF WELL AND LEASE

Lease Name D.H. Goodrich	Well No. 1	Pool Name, Including Formation Dayton ABO	Kind of Lease State, Federal or Fee Fee	Lease to
Location Unit Letter D : 330 Feet From The North Line and 330 Feet From The West Line of Section 35 Township 18S Range 26E, NMPM, Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Crude Oil Refining Co.	Address (Give address to which approved copy of this form is to be sent) Box 159, Artesia, NM 88210			
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Odessa, Texas 79744			
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 35	Twp. 18S	Rge. 26E
	Is gas actually connected?		When Unknown	

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Hole	Diff. Hole
Date Spudded	Oil Depth						P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)	Oil/Gas Pay						Tubing Depth	
Perforations							Depth Casing Shoe	

ILLECIBLE

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of lead oil and must be equal to or exceed top oil able 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 (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Mrs. J.D. Jones (Mrs. J.D. Jones)
owner

(Date)

6-21-83

(Date)

OIL CONSERVATION DIVISION

AUG 26 1983

APPROVED

BY Mike Williams

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 all wells on new and completed wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of conditions. Separate Form C-104 must be filed for each pool in which