

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 8750

RECEIVED BY	Form C-104 Revised 10-01-78 Format 06-01-83 Page 1
SEP 07 1984	
O. C. D.	
ARTESIA, OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Ralph Nix	
Address P.O. Box 617, Artesia, NM 88210	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Chad	Well No. 1	Pool Name, including Formation Atoka/Glorieta, Yeso	Kind of Lease State, Federal or Fee Fee	Lease No. -
Location				
Unit Letter <u>P</u> ; <u>330</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>East</u>				
Line of Section <u>26</u> Township <u>18S</u> Range <u>26E</u> , NMPM, <u>Eddy</u> 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 Crude Oil Purchasing Co.	P.O. Box 175, Artesia, NM 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)
Phillips Petroleum Co.	Phillips Bldg., Bartlesville, Okla 74004
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>J</u> Sec. <u>26</u> Twp. <u>18S</u> Rge. <u>26E</u>	yes Sept. 6, 1984

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.


(Signature)

(Title)
Sept. 7, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 11 1984, 19 _____

BY Original Signed By
Mike Williams

TITLE Oil & 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 pool in multiply completed wells.

Post ID-2
9-14-84
Comp + BX

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X		X					
Date Spudded 7-16-84	Date Compl. Ready to Prod. 8-16-84		Total Depth 3990' GR			P.B.T.D. 3958' GR			
Elevations (DF, RKB, RT, GR, etc.) 3289' GR	Name of Producing Formation Glorieta, Yeso		Top Oil/Gas Pay 2909' GR			Tubing Depth 3739' GR			
Perforations 40, .50" from 2909' to 3680'						Depth Casing Shoe 3985' GR			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"	24#	J-55	948' GR		550 sx circ. 175 sx			
7 7/8"	5 1/2"	15.5#	J-55	3985' GR		700 sx circ. 115 sx			
-	2 7/8"	6.5#	J-55	3739' GR					

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 9-7-84	Date of Test 9-7-84	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 458	Oil-Bbls. 43	Water-Bbls. 415	Gas-MCF 46

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