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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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Operator		Nov 18 1965	
Address		D. C. OFFICE	
Reason		Other (Please explain)	
New Well	Change in Transporter of:	From Western oil	
Recompletion	Oil		
Change in Ownership	Casinghead Gas		
	Dry Gas		
	Condensate		

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, including Formation	Kind of Lease
Texaco State #1		1	North Benson, Queen, Grayburg	State, Federal or Fee E-9262
Location				
Unit Letter	C	330	Feet From The north	Line and 2310
			Feet From The west	
Line of Section	32	Township	18south	Range 30east
			NMPM,	Eddy
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/> or Condensate	Address (Give address to which approved copy of this form is to be sent)		
Permian Corp.		Midland Texas		
Name of Authorized Transporter of Casinghead Gas	<input checked="" type="checkbox"/> or Dry Gas	Address (Give address to which approved copy of this form is to be sent)		
Phillips Pet.		Artesia, New Mex.		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
	C	32	18s	30e
				no
				waiting on con.

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)	<input checked="" type="checkbox"/> Oil Well	<input type="checkbox"/> Gas Well	<input checked="" type="checkbox"/> New Well	<input type="checkbox"/> Workover	<input type="checkbox"/> Deepen	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Same Res'v.	<input type="checkbox"/> Diff. Res'v.	
Date Spudded	May/17/65	Date Compl. Ready to Prod.	Nov./7/65	Total Depth	2966	P.B.T.D.	2966		
Elevations (DF, RKB, RT, GR, etc.)	3440	Name of Producing Formation	Penrose	Top Oil/Gas Pay	2837	Tubing Depth	2829		
Perforations	2837-2838-2859-2861-2871-2884-2898-2943-2944-2948-2949						Depth Casing Shoe	2966	
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/2	10" casing		270		none				
10	8 5/8		498		25				
8	4 1/2		2966		225				
4 1/2	2" upset		2829						

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	11/11/65	Date of Test	11/12/65	Producing Method (Flow, pump, gas lift, etc.)	Flow
Length of Test	24hrs.	Tubing Pressure	300 lbs.	Casing Pressure	150 lbs.
				Choke Size	12/64
Actual Prod. During Test	22x 50 bar.	Oil-Bbls.	50	Water-Bbls.	none
				Gas-MCF	unknown

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.

partner

(Signature)

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 18 1965
BY W. A. Gressett
TITLE

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.

