

DISTRIBUTION		5
SANTA FE		/
FILE		/
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
OPERATOR		/
PRORATION OFFICE		

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

RECEIVED

I. Operator David Fasken JUL 17 1978
Address 608 First National Bank Building, Midland, Texas 79701 O.C.C. ARTESIA, OFFICE
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Yates "6" Federal</u>	Well No. <u>1</u>	Pool Name, Including Formation <u>Eagle Creek - Strawn Gas</u>	Kind of Lease <u>SWM, Federal & SWM</u> <u>NM</u>	Lease No. <u>054434-A</u>
Location Unit Letter <u>L</u> <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>6</u> Township <u>18-S</u> Range <u>26-E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <u>Navajo Crude Oil Purchasing</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 175, Artesia, NM 88210</u>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>Natural Gas Pipeline Co. of America</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 283, Houston, TX 77002</u>					
If well produces oil or liquids, give location of tanks.	Unit <u>L</u>	Sec. <u>6</u>	Twp. <u>18-S</u>	Rge. <u>26-E</u>	Is gas actually connected? <u>yes</u>	When <u>7-17-78</u>

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.
		XX	XX					
Date Spudded <u>12-19-73</u>	Date Compl. Ready to Prod. <u>3-23-74</u>		Total Depth <u>8710'</u>		P.B.T.D. <u>8555'</u>			
Elevations (DF, RKB, RT, GR, etc.) <u>3435.7 GR.</u>	Name of Producing Formation <u>Atoka Strawn</u>		Top Oil/Gas Pay <u>8210'</u>		Tubing Depth <u>8052'</u>			
Perforations <u>8231-8241' 4 shots per foot 0.44" dia.</u>					Depth Casing Shoe <u>8595'</u>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>17-1/2</u>	<u>13-3/8"</u>		<u>509</u>		<u>350 Lite + 700 "C"</u>			
<u>12-1/4</u>	<u>8-5/8"</u>		<u>1205</u>		<u>650 Lite + 200 "C"</u>			
<u>7-7/8</u>	<u>4-1/2"</u>		<u>8595</u>		<u>275 "H"</u>			
	<u>2-3/8"</u>		<u>8052</u>					

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 <u>570</u>	Length of Test <u>24</u>	Bbls. Condensate/MMCF <u>Dry Gas</u>	Gravity of Condensate <u>--</u>
Testing Method (pilot, back pr.) <u>Back Press.</u>	Tubing Pressure (shut-in) <u>2190</u>	Casing Pressure (shut-in) <u>Pkr.</u>	Choke Size <u>1/4"</u>

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.

OIL CONSERVATION COMMISSION
APPROVED JUL 20 1978
BY R. A. Gussitt
TITLE SUPERVISOR, DISTRICT II

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 multiple

Robert H. Angevine (Signature)
Agent
(Title)
7-14-78
(Date)

RECEIVED

OIL CONSERVATION COMMISSION

JUL 20 1978

P. O. DRAWER DD

O. C. C.
ARTESIA, OFFICE

ARTESIA, NEW MEXICO 88210

NOTICE OF GAS CONNECTION

Date July 19, 1978

This is to notify the Oil Conservation Commission that connection
for the purchase of gas from the David Fasken
Operator

Fasken Yates #6 Federal Com, #1 L, Sec. 6, T18S, R26E
Lease Well & Unit S.T.R.

West Atoka Eagle Creek Stream, Natural Gas Pipeline Co. of America
Pool Name of Purchaser

was made on July 17, 1978.

Natural Gas Pipeline Co. of America
Purchaser

M. James McFarland
Representative

Supervisory Engineer
Title

cc: To operator
Oil Conservation Commission - Santa Fe