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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

JUL 14 1975

I. OPERATOR
Operator Gene A. Snow -
Address 606 So. 13th, Lovington, N.M. 88260
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)
CASINGHEAD GAS MUST NOT BE
FLARED AFTER 9-1-75
UNLESS AN EXCEPTION TO Rule 306
IS OBTAINED

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name S&T State Well No. 2 Pool Name, including Formation Queen - Gb. - S. Andrus Kind of Lease State, Federal or Fee Lease No. K-4795
Location
Unit Letter H 1650 Feet From The North Line and 990 Feet From The East
Line of Section 32 Township 18 S Range 29 E, NMPM, Edgemoor County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
National Crude Oil Purchasing Address (Give address to which approved copy of this form is to be sent)
N. Freeman, PO Box 175, Andrus, NM.
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit F Sec. 32 Twp. 18 S Rge. 29 E Is gas actually connected? NO When

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 4-16-75 Date Compl. Ready to Prod. 5-1-1975 Total Depth 3225 P.B.T.D. 3180
Elevations (DF, RKB, RT, GR, etc.) 3422.8 GR. Name of Producing Formation Queen - Gb. - S. Andrus Top Oil/Gas Pay 1922-36 2902-06 Tubing Depth 2930
Perforations 1922 to 2906 110 - 1/2 holes Depth Casing Shoe 3225
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
7 7/8 8 1/2 31 150
4 1/2 4 1/2 3225 450
2 7/8 2 7/8 2930

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 6-5-75 Date of Test 6-5-75 Producing Method (Flow, pump, gas lift, etc.) Pump
Length of Test 24 hrs. Tubing Pressure — Pump Casing Pressure 420 Choke Size —
Actual Prod. During Test 116 Oil-Bbls. 56 Water-Bbls. 60 Free Water Gas-MCF TSTM.

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.

Gene A. Snow
(Signature)

Operator
(Title)

7-4-1975
(Date)

OIL CONSERVATION COMMISSION

JUL 17 1975

APPROVED W. A. Gressett 19
BY W. A. Gressett
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 allowables 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.