

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

JAN 7 1977

I.

Operator	C.O. Fulton		O. C. C.	
Address	ARTESIA, OFFICE			
Reason(s) for filing (Check proper box)	P.O. Box 1121 Artesia, New Mexico 88210			
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Other (Please explain)		
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/>	CASINGHEAD GAS MUST NOT BE		
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	FLARED AFTER 3-2-77		
	Dry Gas <input type="checkbox"/>	UNLESS AN EXCEPTION TO Rule 306		
	Condensate <input type="checkbox"/>	IS OBTAINED		

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Yates State	1	Artesia Pool	State, Federal or Fee State	K 5902
Location				
Unit Letter	I	1650 Feet From The	South	Line and 990 Feet From The East
Line of Section	13	Township	18S	Range 27E, NMPM, Eddy 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 Company	P.O. Drawer 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)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	I	13	18S	27E	no	

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.
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
1-8-76	12-11-76	2357'	2357'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
	Grayburg - San Andres	1925'-1932'	2279'					
Perforations	1925'-1932' 2068'-2092' 2192'-2197' 2212'-2220' 2267'-2278'					Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
8" 1/2	2 1/2 lb		410'		Circulated			
4 1/2"	9 1/2 lb		2357'		150 sks			
	2 3/8"		2279'					

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.)	
12-12-76	12-12-76	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hr			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
65 bbl	25	Frac Water 40	

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.

C. O. Fulton  
(Signature)  
Operator  
(Title)  
  
(Date)

OIL CONSERVATION COMMISSION

JAN 7 1977

APPROVED \_\_\_\_\_, 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 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