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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.
Effective 1-1-65

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AUG 08 '88

Operator
Manzano Oil Corporation ✓ 505/623-1996

O. C. D.

ARTESIA, OFFICE

Address
P.O. Box 2107/Roswell, NM 88202-2107

Reason(s) for filing (Check proper box)

New Well ☒
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
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 Elliott Federal	Well No. 3	Pool Name, including Formation Santo-Nino Bone Spring	Kind of Lease State, Federal or Fee Federal NM	Lease No. 27279
Location Unit Letter 0 : 760' Feet From The South Line and 2080' Feet From The East Line of Section 30 Township 18S Range 30E , 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"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Drawer 159/Artesia, NM 88211-0159					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1267/Ponca City, OK 74603					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 30	Twp. 18S	Rge. 30E	Is gas actually connected? Yes	When 8/2/88

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded 6/4/88	Date Compl. Ready to Prod. 7/31/88		Total Depth 8352'		P.B.T.D. 8285'			
Elevations (DF, RKB, RT, GR, etc.) 3441' GR	Name of Producing Formation Bone Spring		Top Oil/Gas Pay 7165' 7/77		Tubing Depth 8039'			
Perforations 7177-7339', 7438-7460', 8055-8190' Bone Spring					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	405'	400
12-1/4"	8-5/8"	2,076'	800 + 200 + 1" w/375
7-7/8"	5-1/2"	8,352'	400
	2 7/8	8039	

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 7/30/88	Date of Test 7/31/88	Producing Method (Flow, pump, gas lift, etc.) pumping	
Length of Test 24 hrs	Tubing Pressure N/A	Casing Pressure N/A	Choke Size N/A
Actual Prod. During Test	Oil-Bbls. 160	Water-Bbls. 180 (load water)	Gas-MCF 345

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, 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.


(Signature)

Jackie Midkiff, Landowman

8/2/88

(Title)

(Date)

OIL CONSERVATION COMMISSION

AUG 17 1988

APPROVED _____, 19 _____

BY _____
Original Signed By
Mike Williams

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 allow able 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 completed wells.