SANTA FE	/	
FILE	/	✓
U.S.G.S.		
LAND OFFICE		
TRANSPORTER OIL	/	
TRANSPORTER 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-
Effective 1-1-65

Operator

D. R. Clary ✓

Address

P. O. Box 1267 Odessa, Texas 79760

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)
Well on TA status prior to work.

If change of ownership give name and address of previous owner

CASINGHEAD GAS MUST NOT BE FLARED AFTER 2-1-77 ✓ UNLESS AN EXCEPTION TO Rule 306 IS OBTAINED

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Turkey Track-Sec 3 Unit	9	~~Grayburg~~-Queen (Gas)	State, Federal or Fee State	B-9739

Location

Unit Letter H ; 1980 Feet From The North (~~South~~) Line and 660 Feet From The East

Line of Section 3 Township 19 S Range 29 E , NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ — Address (Give address to which approved copy of this form is to be sent)
Navajo Refining Co. Pipeline Div. — Artesia, New Mexico

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	Sec.	Twp.	Rge.	Is gas actually connected?	When
	H	3	19S	29E		

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
	X			X		X	X	

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	12/1/76	2892	2365

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
GLE - 3403	Grayburg-Queen	2148	2310

Perforations	Depth Casing Shoe
2316-2320, 2305-2309, 2236-2244, 2158-2162, 2148-2152	2424

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8 5/8"	344	50
8"	7"	2424	66
	2 3/8 EUE	2310	

TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
	12/1/76	Pump-n	Gas flowing from casing

Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hrs.	0	30	None

Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
11 Bbls.	11 Bbls.	None	398 MCF/D

GAS WELL

POSTED 12-3-76 12-24-76

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

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.

L. G. Guess
(Signature)

P. E. Agent
(Title)

12/13/76
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 21 1976, 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.