

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

NOV 4 1968

O. C. B.  
ARTESIA, OFFICE

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/>
OPERATOR	
PRORATION OFFICE	

I. Operator  
E. A. Culbertson & Wallace W. Irwin & Odessa Equipment Co., Inc.  
Address  
400 First National Bank Bldg., Odessa, Texas 79760  
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 Federal 18	Well No. 2-18	Pool Name, Including Formation East Benson-Yates	Kind of Lease Federal	Lease No. LC 069464-A
Location Unit Letter "K" ; 2310 Feet From The South Line and 2162.8 Feet From The West Line of Section 18 Township 19S Range 31E , 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas 79701			
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 "K"	Sec. 18	Twp. 19	Rge. 31
Is gas actually connected?		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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input checked="" type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 9/13/68	Date Compl. Ready to Prod. 10/17/68		Total Depth 2340		P.B.T.D. 2323			
Elevations (DF, RKB, RT, GR, etc.) 3417 D.F.	Name of Producing Formation E. Benson-Yates		Top Oil/Gas Pay 2246		Tubing Depth 2240			
Perforations 2246' - 2264'					Depth Casing Shoe 2223			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 10"	CASING & TUBING SIZE 8-5/8"		DEPTH SET 460		SACKS CEMENT 150			
6"	4-1/2"		2323		100			
	2 3/4"		2240					

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 10/17/68	Date of Test 10/30/68	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hrs.	Tubing Pressure -0-	Casing Pressure -0-	Choke Size Open 2"
Actual Prod. During Test 25 Bbls.	Oil-Bbls. 20 Bbls.	Water-Bbls. 5 Bbls.	Gas-MCF T.S.M.

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	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.

Odessa Equipment Company, Inc.

By: J. D. Haynes (Signature) President  
Joint Owner  
(Title)

November 1, 1968  
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 4 1968  
BY W. A. Gressett  
TITLE OIL AND GAS INSPECTOR

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 multiply completed wells.