

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

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C. W. TRAINER

O. C. C.
ARTESIA, OFFICE

P. O. Box 1100 Hobbs, New Mexico

Reason(s) for filing (check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Reconveyance	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Joyce	Well No.	1	Pool Name, Including Formation	Undesignated <i>Shugart</i>	Kind of Lease	2306 4577-F
						State, Federal or Fee	Federal
Location							
Unit Letter	D	660	Feet From The	North	Line and	660	Feet From The
							West
Line of Section	12	Township	19-South	Range	31-East	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)	P. O. Box 3119, Midland, Texas			
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
	D	12	19S	31E	No - New Well	

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.
	X		X					
Date Spudded	11-30-66	Date Compl. Ready to Prod.	3-7-67	Total Depth	11,191'	P.B.T.D.	3601'	
Pool	Undesignated	Name of Producing Formation	Queen	Top Oil/Gas Pay	3463'	Tubing Depth	3580'	
Perforations	3463' - 3565'					Depth Casing Shoe	4194'	
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
15"	11 3/4"	714'	370					
11"	8 5/8"	3135'	350					
7 7/8"	4 1/2"	4194'	500					
	2 3/8" tubing	3580'						

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	3-7-67	Date of Test	3-7-67	Producing Method (Flow, pump, gas lift, etc.)	Pump
Length of Test	24 hours	Tubing Pressure	0	Casing Pressure	0
Actual Prod. During Test	125 BF	Oil - Bbls.	22 BO	Water - Bbls.	103 BW
				Choke Size	-
				Gas - MCF	-

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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. W. Trainer (Signature)
Owner - Operator

(Title)

March 13, 1967

(Date)

OIL CONSERVATION COMMISSION

APPROVED *W. A. Gressitt*, 19

BY *W. A. Gressitt*
TITLE *OIL AND GAS INSPECTION*

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 Sections I, II, III, and VI only 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.