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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION 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-110  
Effective 1-1-65

RECEIVED

APR - 5 1976

Operator The Petroleum Corporation	
Address 3303 Lee Parkway, Dallas, Texas 75219	
J. C. C. ARTESIA, OFFICE	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	To add Llano Gas Co. as purchaser
Recompletion <input type="checkbox"/>	on (split-stream) with El Paso
Change in Ownership <input type="checkbox"/>	Natural Gas Company.
Change in Transporter of:	
Oil <input type="checkbox"/>	
Dry Gas <input checked="" type="checkbox"/>	
Casinghead Gas <input type="checkbox"/>	
Condensate <input type="checkbox"/>	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Lease Name Parkway West Unit	Well No. 1	Pool Name, including Formation West Parkway Atoka	Kind of Lease State, Federal or Fee	Lease No. K-3153
Location				
Unit Letter C	660	Feet From The North	Line and 1980	Feet From The West
Line of Section 28	Township 19 South	Range 29 East	NMPM, Eddy	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Koch Oil Company	P.O. Box 1556, Breckenridge, Texas 76024
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Llano, Inc.	P.O. Box 1320, Hobbs, New Mexico 88240
El Paso Natural Gas Company	P.O. Box 1492, El Paso, Texas 79999
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit C	Sec. 28
Twp. 19S	Rge. 29E
Yes	2-24-76
	9-17-73

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 Res't.	Diff. Res't.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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

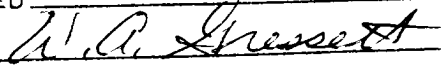
VI. CERTIFICATE OF COMPLIANCE

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.

  
R.H. Vick  
Engineer  
(Title)  
4-1-76  
(Date)

OIL CONSERVATION COMMISSION

APR - 5 1976

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY   
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 Form C-104 must be filed for each pool in multiply