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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

SEP 21 1973

Operator Dorchester Exploration, Inc.		O. C. C. ARTESIA, OFFICE	
Address 1204 Vaughn Building, Midland, Texas 79701			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:		
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of ownership give name
and address of previous owner

Production Unit No. 14866

II. DESCRIPTION OF WELL AND LEASE		Lease No.	
Lease Name DWU-Federal	Well No. 1	Pool Name, including Formation Winchester-Morrow	Kind of Lease State, Federal or Fee Federal
Location Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East		NM 0473362	
Line of Section 34 Township 19S Range 28E , NMPM, Eddy County			

III. 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)	
Permian Corporation		Box 1183, Houston, Texas	
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)	
El Paso Natural Gas		Box 1384, Jal, New Mexico 88252	
If well produces oil or liquids, give location of tanks.	Unit J Sec. 34 Twp. 19S Rge. 28E	Is gas actually connected? Yes	When 17 9-18-73

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

IV. COMPLETION DATA		Oil Well		Gas Well		New Well		Workover		Deepen		Plug Back		Same Res'v.		Diff. Res'v.	
Designate Type of Completion - (X)		X		X		X											
Date Spudded 12-20-72		Date Compl. Ready to Prod. 4-30-73		Total Depth 11,245		P.B.T.D. 11,114											
Elevations (DF, RKB, RT, GR, etc.) 3307 GL		Name of Producing Formation Morrow		Top Oil/Gas Pay 11,030		Tubing Depth 10,982											
Perforations 11,030-11,051						Depth Casing Shoe 11,245											
TUBING, CASING, AND CEMENTING RECORD																	
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT											
16		13 3/8		301		300											
12 1/4		8 5/8		3030		925											
7 7/8		4 1/2		11253		975											

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)

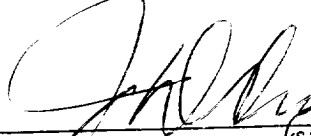
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

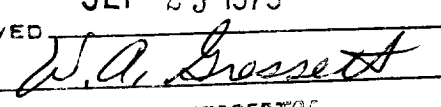
GAS WELL

Actual Prod. Test-MCF/D AOF 1770	Length of Test 4 hr.	Bbls. Condensate/MMCF 37.8	Gravity of Condensate 47.0 API
Testing Method (pitot, back pr.) Back pressure	Tubing Pressure (shut-in) 3162	Casing Pressure (shut-in) Pkr.	Choke Size Various - 4 point

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)
Engineer
(Title)
September 18, 1973
(Date)

OIL CONSERVATION COMMISSION SEP 25 1973	
APPROVED	19
BY 	
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	