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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-11
Effective 1-1-65

RECEIVED

AUG 28 1980

Operator Flag-Redfern Oil Company		O. C. D.	
Address P.O. Box 23 Midland, Texas 79702		ARTESIA OFFICE	
Reason(s) for filing (check proper box)		Other (Please explain)	
New Well ☒	Change in Transporter of:		
Recompletion ☐	Oil ☐	Dry Gas ☐	
Change in Ownership ☐	Casinghead Gas ☐	Condensate ☐	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico State	Well No. 4	Pool Name, including Formation Shugart, (Y, 7R, Q, Gryb)	Kind of Lease State, Federal or Fee State	Lease No. LG-2353
Location				
Unit Letter M	660	Feet From The South	Line and 660	Feet From The West
Line of Section 2	Township 19-S	Range 31-E	N.M.P.M. Eddy	County

III. 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)					
Basin, Inc.	P.O. Box 2297 Midland, TX 79702					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
Continental Oil Company	P.O. Box 2197 Houston, TX 77001					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 2	Twp. 19-S	Rge. 31-E	Is gas actually connected? Yes	When 8-2-80 10-15-79

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 Resv.	Diff. Resv.
	x		x					
Date Spudded 6-21-80	Date Compl. Ready to Prod. 8-02-80		Total Depth 4274		P.B.T.D. 4234			
Elevations (D.F., R.H.B., RT, GR, etc.) 3601 GR	Name of Producing Formation Queen & Grayburg		Top Oil/Gas Pay 3371		Tubing Depth 3822			
Perforations 3371-3447 + 3850-3903					Depth Casing Shoe 4274			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		833		475 sx. Cem. Circ.			
7-7/8"	4-1/2"		4274		875 sx.			
	2 3/8"		3822					

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 all able for this depth or be for full 24 hours)

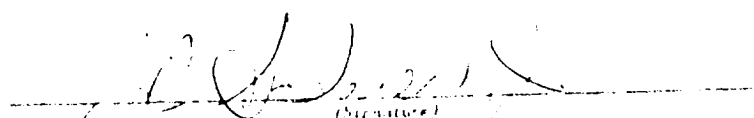
Date First New Oil Run To Tanks 8-02-80	Date of Test 8-13-80	Producing Method (Flow, pump, gas lift, etc.) Pump 2" x 1-1/4" x 12'	
Length of Test 24 hrs.	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test	Oil-Bbls. 20	Water-Bbls. 8	Gas-MCF 25

GAS WELL

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



Engineer
(Title)
August 27, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 29 1980
BY N. 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 day's tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of operator, well name or number, or transporter or other such change of ownership.
Separate Form C-104 must be filed for each pool in multiple completion wells.