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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 1-1-55

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OCT 8 1976

Operator Flag-Redfern Oil Company ✓		O. C. C. ARTESIA, OFFICE
Address P. O. Box 23, Midland, Texas 79701		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>	- Effective August 1, 1976 for SUG to GNM
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>		

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Lease Name Winston Gas Com.		1	Indian Basin Morrow	State, Federal or Fee Federal	LC-063246
Location					
Unit Letter	K	2080	Feet From The	South	Line and 1980
Line of Section		31	Township	21S	Range 24E
					NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>		P. O. Box 3119, Midland, Texas 79701	
The Permian Corporation		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Box 1324, Artesia, New Mexico	
Marathon Oil Company		First International Bldg., Dallas, Tx. 75270	
Gas Company of New Mexico		Is gas actually connected? When	
If well produces oil or liquids, give location of tanks.		Unit K	Sec. 31
		Twp. 21S	Rge. 24E
		Yes 4-13-66	
		9-1-65	

If this production is commingled with that from any other lease or pool, give commingling order number: SW-211 PC-292

V. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
Designate Type of Completion - (X)									
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		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test		
Tubing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED OCT 8 1976	
Production Clerk (Signature) October 7, 1976 (Date)		BY W. 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 deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowables 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 multiple completions.	