

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

FEB 21 1975

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

I. Operator  
Monsanto Company  
Address  
321 West Texas, Midland, Texas 79701  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☒ Additional transporter of dry gas  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
ARTESIA, OFFICE

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Burton Flat (Deep) Unit	Well No. 3-11	Pool Name, Including Formation Burton Flat - Strawn	Kind of Lease State, Federal or Free Federal	Lease No. NM-0560289
Location Unit Letter V ; 700 Feet From The South Line and 700 Feet From The West Line of Section 3 Township 21S Range 27E , 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> See attachment	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 V	Sec. 3
	Twp. 21S	Range 27E
	Is gas actually connected? Yes	
	When 7/12/73 - Southern Union 8/13/73 - Transwestern 2/7/75 - Llano, Inc.	

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't.	Diff. Res't.
		X	X					
Date Spudded 1/23/73	Date Compl. Ready to Prod. 4/16/73	Total Depth 11,546	P.B.T.D. 11,472					
Elevations (DF, RKB, RT, CR, etc.) 3223 DF	Name of Producing Formation Strawn	Top Oil/Gas Pay 10,064	Tubing Depth 9987					
Perforations 10,028-220; 10,232-238; 10,242-250 w/ 2 shots/Ft.			Depth Casing Shoe 11,546'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		602'		750 Sx.			
12 1/4"	9 5/8"		2854'		1250 Sx.			
8 3/4"	7"		11,546'		460 Sx.			
	2 3/8" Tubing		9987					

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 1120	Length of Test 4 Hr.	Bbls. Condensate/MMCF 64	Gravity of Condensate 62°
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 3255	Casing Pressure (Shut-in) Pkr.	Choke Size 12/64"

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.

*W. Schell*  
(Signature)

District Production Manager

February 19, 1975

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 24 1975

BY

*Supervisor District II*  
SUPERVISOR DISTRICT II

TITLE

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 completed wells.