

DISTRIBUTION	
ANTA FE	
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S.G.S.	
AND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

Form C-104
Supersedes Old C-104 as
Effective 1-1-65

APR 12 1974

Operator DAVID FASKEN		O. C. C. ARTESIA, OFFICE	
Address 608 First National Bank Building, Midland, Texas 79701			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:	A temporary C-104 for testing allowable approved by N.M.O.C.C. 11-20-73.	
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

II. DESCRIPTION OF WELL AND LEASE

Lease Name El Paso "3" Federal	Well No. 1	Prod. Name, Including Formation Wildcat Strawn	Kind of Lease State, Federal or Fee Federal	Lease No. 911
Location Unit Letter K 2723.9' N 489 Feet From The North Line and 3780' E 195 Feet From The East line of Lot 11				
Section 3 Township 21-S Range 26-E , 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"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) Drawer 175, Artesia, N. M. 88210
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) Box 1384, Jal, N. M. 88252
If well produces oil or liquids, give location of tanks.	Unit K Sec. 3 Twp. 21-S Rge. 26-E Is gas actually connected? <input checked="" type="checkbox"/> When Expect in 10 days.

If this production is commingled with that from any other lease or pool, give commingling order number: **PC-581 11-27-79**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX	XX					
Date Spudded August 3, 1973	Date Compl. Ready to Prod. Nov. 24, 1973	Total Depth 11,240'			P.B.T.D. 10,945'			
Elevations (DF, RKB, RT, GR, etc.) 3189' GR	Name of Producing Formation Strawn	Top Oil/Gas Pay 9,847'			Tubing Depth 9,647'			
Perforations Strawn 9847-9855 & 9910-9922					Depth Casing Shoe 10,997'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-5/8", 48#, H-40		346'		200 sx. Lite + 100 sx. "C"			
12-1/4"	8-5/8", 24#, K-55		2,267'		850 sxs Lite + 440 sx. "C"			
7-7/8"	5-1/2", 17 & 20#, N-80, LT&C		10,997'		650 sxs.			

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 CAOPP 37,000 MCF/D	Length of Test 4	Bbls. Condensate/MMCF 21.7	Gravity of Condensate 60
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 3305	Casing Pressure (shut-in) Packer	Choke Size Various

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.

S. L. Parks

Agent

April 11, 1974

(Date)

OIL CONSERVATION COMMISSION

APPROVED **APR 29 1974**, 19_____
BY **A. A. Gressett**
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 deepener 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 wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes well name or number, or transporter, or other such change of

Separate Forms C-104 must be filed for each pool or recompleted wells.