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OPERATOR		2
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NEW MEXICO OIL CONSERVATION COMMISSION

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

MAR 14 1975

Operator C & K Petroleum, Inc.		O.C.C.	
Address 607 Midland National Bank Bldg., Midland, Texas 79701		ARTESIA, OFFICE	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change In Transporter of:	*This well drilled and completed by Gulf Oil Corp.	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
Change In Ownership <input checked="" type="checkbox"/> *operator	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE			
Lease Name Harold Olive Com.	Well No. 1	Pool Name, including Formation South-Central Undesignated - Wolfcamp	Kind of Lease State, Federal or Fee Fee
Location Unit Letter 0 ; 660 Feet From The South Line and 1980 Feet From The East			
Line of Section 14 , Township 22-S Range 26-E , NMPM, Eddy County			

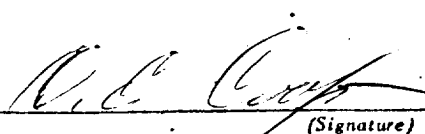
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> None		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.		Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, Texas 79999	
If well produces oil or liquids, give location of tanks.	Unit 0 Sec. 14 Twp. 22-S Rge. 26-E	Is gas actually connected? No Yes	When 3-31-75

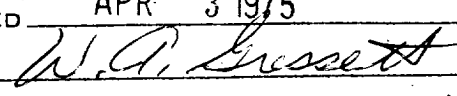
If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well
		X	X
Date Spudded 10-24-73	Date Compl. Ready to Prod. 2-25-74	Total Depth 11708	P.B.T.D. 9986
Pool undesignated	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 9836	Tubing Depth 2-7/8" @ 9476'
Perforations 9836 - 9846			Depth Casing Shoe 10414
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	207'	700 sx. circ.
17-1/2"	13-3/8"	2249'	1300 sx. circ
12-1/4"	9-5/8"	5325'	1260 sx toc @ 2230'
8-3/4"	7"	10414'	615 sx toc @ 8330'

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 1253	Length of Test 4-1/2 hrs	Bbls. Condensate/MMCF none	Gravity of Condensate ---
Testing Method (pitot, back pr.) Back press.	Tubing Pressure 440#	Casing Pressure Pkr.	Choke Size 18/64"

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.	
	
Administrative Supervisor	
March 13, 1975	

OIL CONSERVATION COMMISSION	
APPROVED	APR 3 1975
BY	
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 allowable on new and recompleted wells.	
Fill out Sections I, II, III, and VI only 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.	