	NO. OF COPIES RECEIVED			
ļ	DISTRIBUTION		INSERVATION COMMISSION	Form C-104
	SANTA FE	REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
ŀ	FILE		AND	
ł	U.S.G.S.	AUTHORIZATION TO TRAF	NSPORT OIL AND NATURAL GAS	
ł	OIL			
Ì	OPERATOR			
1.	PRORATION OFFICE MAY 1 9 1975			
	The Petroleum Corp	oration		. C. C.
	3303 Lee Parkway,	Dallas, TX 75219		SIA, OFFICE
	Reason(s) for filing (Check proper box)	,	Other (Please explain)	
	New Well	Change in Transporter of:	- ·	
	Recompletion	Oil Dry Gas	sate 🗌 200 Com in Scal	
	Change in Ownership	Casinghead Gas Condens	sate _ 2 6 C. Game & Carl	the the first state of the second state of the
	If change of ownership give name			
and address of previous owner				
	DECODED TON OF WELL AND	Flat moncer		
п.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo		Lease No.
	Superior Federal 🥢	3 Prisell Mori	rOW State, Federal o	Fee Federal NM 0144 - 698
	Location			
Unit Letter M ; 660 Feet From The South Line and 660 Feet From The West				west
	4 54	mahin 20S Range 2	29E . NMPM. Eddy	County
	Line of Section 4 Tow	mship 20S Range 2		· · · · · · · · · · · · · · · · · · ·
111.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	<u>s</u>	
	Name of Authorized Transporter of Oil or Condensate A Address (Give adaress to which approved copy of this form to TCODA			
	Koch Oil Company		Address (Give address to which approved	L copy of this form is to be sent)
	1			
	<u>El Paso Natural Gas</u>	Unit Sec. Twp. Rge.	Is gas actually connected? When	
	If well produces oil or liquids, give location of tanks.	M 4 20S 29E	Yes	eent 5-14-75
	If this production is commingled with		give commingling order number:	
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well 'Gas Well 'New Well 'Workover 'Deepen 'Plug Buck Sam				Plug Back Same Restv. Diff. Restv.
	Designate Type of Completio			
	Date Spudded	Date Compl. Ready to Prod.	iotai Dopin	P.B.T.D.
	6/2/74	8/6/74	11,710	11,682
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	100 011 000 1 01	Tubing Depth
	GL -3308	Morrow	10,900	11,267 Depth Casing Shoe
	Perforations 11,384 to 397'; 11,502 to 506'; and 11,667 t		o 671' 11, 710	
	TUBING, CASING, AND		CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	17 1/2	12 3/4	597	<u> </u>
	12	8.5/8	<u>3099</u> 11,710	<u>800 & 800 sxs</u> 700 sxs
	7_7/8	15.1/2	11,710	
	THE AND REQUEST F		fter recovery of total volume of load oil an	d must be equal to or exceed top allow-
V.	able 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,	λ_{E}
		Tubing Pressure	Casing Pressure	Choke Size
	Length of Test			3
	Actual Proi. During Test	Oil-Bbla.	Water-Bbls.	Gas-MCF
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	1,497	4 hours	4.7	56.0
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	Back Pressure	2713	Packer	16/64''
VI	. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
			APPROVED MAY 16 1975	
	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.		1.1 A gresset	
			BY A CL + Fresset	
			TITLE SUPERVISOR, DISTRICT II	
- ^		This form is to be filed in compliance with RULE 110		ompliance with RULE 1104.
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	If this is a request for allowable for a newly drilled or deepened	
	(Signature) Petroleum Engineer (Title)		well, this form must be accompanied by a the NULE 111. tests taken on the well in accordance with NULE 111. All sections of this form must be filled out completely for sllow- able on new and recompleted wells.	
		•	11	

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May 8, 1975

(Date)

All sections of this form must be filled out completely in analysis able 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.