

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED

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O. C. D.

ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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LAND OFFICE	
TRANSPORTER	☒
OIL	☒
GAS	☒
OPERATOR	
PRODUCTION OFFICE	
Operator	

The Petroleum Corporation

Address

One Marienfeld Place Suite 555

Reason(s) for filing (Check proper box)

New Well ☐Recompletion ☒Change in Ownership ☐

Change in Transporter oil

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous ownerDESCRIPTION OF WELL AND LEASE **R-7783 1/17/85** NM-0144698

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Superior Federal	4	Indiant <i>Strawn</i>	State, Federal or Foreign Federal	
Location Burton Flat - Upper Strn.				
Unit Letter I	1980	Feet From The South	Line and 660	Feet From The East
Line of Section 5	Township 20 South	Range 29 East	NMPM, Eddy	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Koch Oil Co.	P.O.Box 1556, Breckenridge, Texas 76024
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.	P.O.Box 1492, El Paso, Texas 79999
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
I 5 20 29	Yes 7/31/78

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 ☐	Workover ☐	Deepen ☐	Plug Back ☒	Same Res'v. ☐	Diff. Res'v. ☒
Date Spudded 1/18/78	Date Compl. Ready to Prod. 4/18/80		Total Depth 11675		P.B.T.D. 10560			
Elevations (DE, RKB, RT, GR, etc.) 3307 KB	Name of Producing Formation Strawn		Top Oil/Gas Pay 10314		Tubing Depth 10203			
Perforations 10304 - 10308 (out of zone) 10314 - 10318					Depth Casing Shoe 11675			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2	13-3/8	402'	480 SX
11	8-5/8	3134'	750 SX
7-5/8	5-1/2	11675'	525 SX

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)

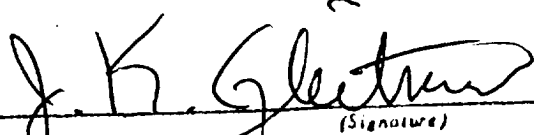
Date First New Oil Run To Tanks 4/18/80	Date of Test 6/3/80	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs	Tubing Pressure 960	Casing Pressure 0	Choke Size 1/4"
Actual Prod. During Test	Oil - Bbls. 203	Water - Bbls. 0	Gas - MCF 530

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

I. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.



District Engineer

June 30, 1980

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED **JUL 11 1980**, 19BY **W. A. Gussott**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 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 completed wells.

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