

DISTRIBUTION	
SANTA FE	1
ELC	1
OGS	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS 1
OPERATOR	
REGISTRATION OFFICE	

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

Form C-104
Supersedes Old C-104 and
Effective 1-1-83

RECEIVED

NOV 20 1981

O. C. C.

ARTESIA, OFFICE

1. Operator
CITIES SERVICE COMPANY
Address
P. O. Box 1919 Midland, Texas 79702

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Government AL	Well No. 1	Pool Name, including Formation <i>Quartz Flat</i> Undesignated Morrow	Kind of Lease State, Federal or Fee Fed N.M.	Lease No. 17220
Location Unit Letter <u>B</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>17</u> Township <u>20S</u> Range <u>28E</u> , NMPM, <u>Eddy</u> 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"/> Western Crude Oil, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 1142, Midland, Texas 79702			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <i>Cabot Corporation</i>	Address (Give address to which approved copy of this form is to be sent) Box 4395 Midland Texas 79702			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 17	Twp. 20S	Rge. 28E
Is gas actually connected?		When		
NO YES		5-18-82		

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'v.	Diff. Res'v.
		X	X					
Date Spudded 9-2-81	Date Compl. Ready to Prod. 11-9-81		Total Depth 11,310'		P.B.T.D. 11,260'			
Elevations (DF, RKB, RT, GR, etc.) 3272' GR	Name of Producing Formation Morrow		Top Oil/Gas Pay 10,843'		Tubing Depth 10,761'			
Perforations 2-0.50" SPF @ 10,843-846-849-853-890-891-896-898-900-901-907-909-916-918-924-930-938-10940-943-948-952-954-959-961-965-966-974-977-*					Depth Casing Shoe 11,310'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		425'		500			
12-1/4"	8-5/8"		3000'		1700			
7-7/8"	5-1/2"		11310'		850			

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 C.A.O.F. 3,239	Length of Test 4 hrs.	Bbls. Condensate/MMCF 1.85	Gravity of Condensate 54.2
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 3389#	Casing Pressure (shut-in) packer	Choke Size 9,11,13,16/64"

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.

Elmer Stantz
(Signature)

Region Operations Manager-Production
(Title)

November 19, 1981
(Date)

*-10980' (Total 58 holes)

OIL CONSERVATION COMMISSION

MAY 24 1982

APPROVED _____, 19

BY *Mr. W. H. ...*

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 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