

OIL CONSERVATION DIVISION

Form C-104
Revised 10-1-78P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

NOV 20 1982

O. C. D.

ARTESIA, OFFICE

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Barber Oil, Inc.

Address

P. O. Box 1658 Carlsbad, NM 88220

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Unit # 14-08-0001-16916

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Saladar Unit	12	Saladar-Yates	State, Federal or Fee	

Location

Unit Letter K : 1980 Feet From The South Line and 1980' Feet From The WestLine of Section 33 Township 20S Range 28E , NMPLM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Refining Co.	P. O. Box 175 Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
NONE	

Well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually connected?	When
	K	33	20S	28E		

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 Resin, Diff. Resin
	X		X				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
7-22-82	11-16-82	711'					
Deviation (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
3198' GR	Yates	631' 6-5	672' 8"				
Perforations			Depth Casing Shoe				
2 shots per foot at a depth of 658' to 682' through casing			711'				

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
6-3/4"	11.60# 4 1/2" OD cas.	711'	250 to surface
	4.7# 2-3/8" OD tub.	672' 8"	
9-5/8"	26.40# 7-5/8"	82'	15 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 Rtn To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	Post ID-2 12-3-82 Camp & BK
11-16-82	11-18-82	pump	
Length of Test	Tubing Pressure	Casing Pressure	
24 hrs.			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
4 bbls	2 bbls	2 bbls	

AS WELL

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

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.

President

(Title)

11-24-82

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 01 1982, 19
Original Signed By
BY Louis A. Clements
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 multiply completed wells.