

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-1-78

RECEIVED BY

JAN 03 1984

O. C. D.  
ARTESIA, OFFICEREQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
PROMOTION OFFICE	

Liberty Oil &amp; Gas

Address

1776 Woodstead Court, Suite 200, The Woodlands, Texas 77380

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 checked="" type="checkbox"/>

Other (Please explain)

If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Doris Federal	1	Burton Flat-Morrow	State, Federal or Fee Federal	NM-15873

Location

Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East

Line of Section 26 Township 20 South Range 28 East, NMPM, Eddy County

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
The Permian Corporation	Box 3119, Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
L. Lano Inc.	Box 1320 Hobbs, NM 88240
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
J 26 20S 28E	Yes Dec. 6, 1983

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't.	Diff. Res't.
		X	X				X	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
7/28/83	10/6/83	11,620'	11,400'					
Elevations (DF, RKB, ET, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3263.5' GR	Morrow	11,163'	10,654'					
Perforations		(4SPF)	Depth Casing Shoe					
11,163-172, 11,176-182, 11,218-225, 11,240-256, 11,303-307, 11,319-330			11,619'					

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	621'	640 sx
12 1/4"	9 5/8"	2900'	1125 sx
7 7/8"	5 1/2"	11619	975 sx
	2 3/8"	10,654'	

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
2,453	24 hours	5 bbls	62
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Back pressure		pk	

## 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.Jerry W. Franklin  
(Signature)Agent  
(Title)12/30/83  
(Date)

## OIL CONSERVATION DIVISION

JUL 05 1984

APPROVED \_\_\_\_\_, 19

BY \_\_\_\_\_

TITLE \_\_\_\_\_

Original Signed By  
Leslie A. Clements  
Supervisor District II

This form is to be filed in compliance with RULE 110.

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 Form C-104 must be filed for each pool in multiple completed wells.