

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-1-78

RECEIVED BY

SEP 18 1984

O. C. D.

ARTESIA, N. M.

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

Operator  
Liberty Oil & Gas Corporation ✓Address  
1776 Woodstead Court, Suite 200, The Woodlands, Texas 77380

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)

CASINGHEAD GAS MUST NOT BE  
FLARED AFTER 11-10-84If change of ownership give name  
and address of previous ownerUNLESS AN EXCEPTION FROM  
THE B. L. M. IS OBTAINED ✓

## DESCRIPTION OF WELL AND LEASE

Lease Name Doris Federal	Well No. 3	Pool Name, including Formation E. Hvalar Wildcat Bone Spring	Kind of Lease State, Federal or Fee Federal	Lease No. NM-15873
Location Unit Letter I, 1980 Feet From The South Line and 660 Feet From The East Line of Section 26 Township 20S Range 28E, NMPL, 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) 410 HS&L Bldg., Bartlesville, Oklahoma 74001					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 26	Twp. 20S	Rge. 28E	Is gas actually connected? No	When

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Hst. <input checked="" type="checkbox"/>	Chf. Res. <input type="checkbox"/>
Date Spudded 7/11/84	Date Compl. Ready to Prod. 8/20/84		Total Depth 6310'		P.B.T.D. 6265'			
Elevations (DF, RKB, RT, GR, etc.) 3278' GR	Name of Producing Formation Bone Spring		Top Oil/Gas Pay 5576'		Tubing Depth 5539'			
Perforations 5576-5600' (4 SPF=100 holes)					Depth Casing Shoe 6308'			

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
24.0"	20.0"	40'	3 yards Redi-mix
17 1/2"	13 3/8"	428'	475 sx(Circulated)
11.0"	8 5/8"	2719'	1780 sx(Circulated)
7 7/8"	5 1/2"	6308'	790 sx(2 stages)

TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL

Date First New Oil Run To Tanks 8/16/84	Date of Test 8/17/84	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 1072 psi	Casing Pressure Pkr	Choke Size 9/64
Actual Prod. During Test 82 bbls	Oil-Bbls. 82	Water-Bbls. 0	Gas-MCF 2,822

Post FD-2  
10-12-84  
Gump & BK

## GAS 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.

Larry W. Franklin

(Signature)

Agent

(Title)

9/17/84

(Date)

## OIL CONSERVATION DIVISION

APPROVED OCT 9 1984, 19

BY Original Signed By

Leslie A. Clements

TITLE Supervisor District II

This form is to be filed in compliance with RULE 11.1.

If this is a request for allowable for a newly drilled or deeper  
well, this form must be accompanied by a tabulation of the deviat-  
ions taken on the well in accordance with RULE 11.1.All sections of this form must be filled out completely for all  
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of own-  
er, well name or number, or transporter, or other such change of condi-  
tion.Separate Forms C-104 must be filed for each pool in multi-  
completed wells.