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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION 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 C-110
Effective 1-1-65

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JAN 31 1969

O. C. C.
ARTESIA, OFFICE

I.

Operator MONSANTO COMPANY	
Address 101 North Marienfeld, Midland, Texas 79701	
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"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name ROCK TANK UNIT	Well No. 1	Pool Name, Including Formation Rock Tank (Upper Morrow)	Kind of Lease State, Federal or Fee Federal
Location Unit Letter D ; 660 Feet From The North Line and 920 Feet From The West			
Line of Section 7 , Township 238 Range 25E , NMFM, Eddy 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) Box 2521, Houston, Texas 77001	
If well produces oil or liquids, give location of tanks.	Unit D Sec. 7 Twp. 238 Rge. 25E	Is gas actually connected? No When 3-21-69 3-1-69
If this production is commingled with that from any other lease or pool, give commingling order number: PLC-29		

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded 11-11-67	Date Compl. Ready to Prod. 1-23-68		Total Depth 11,026'		P.B.T.D. 10,394'			
Pool Rock Tank (Upper Morrow)	Name of Producing Formation Upper Morrow		Top Oil/Gas Pay 9923'		Tubing Depth 10,207' None			
Perforations 9965-78'			Depth Casing Shoe 10,472'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		2426'		950			
7-7/8"	5-1/2"		10,472'		500			
5-1/2"	2-7/8"		10,207'		---			

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 6698	Length of Test 4 hrs	Bbls. Condensate/MMCF 0	Gravity of Condensate 0
Testing Method (pitot, back pr.) back pr.	Tubing Pressure 3076-2694	Casing Pressure --	Choke Size 7-16/64"

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.

D. W. Wood **A. W. Wood**
(Signature)
Dist. Prod. Supt.
(Title)
January 30, 1969
(Date)

OIL CONSERVATION COMMISSION
MAR 28 1969
APPROVED
BY W. A. Gressett
TITLE OIL AND GAS PRODUCTION

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 Sections I, II, III, and VI only 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 multiphase completed wells.