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U.S.G.S.		Ĭ	
LAND OFFICE			
TRANSPORTER	OIL	7	
	GAS	17	
OPERATOR			
PRORATION OFFICE			
Operator			
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Address			
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## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

FILE / L		AND		
U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL O	FARREGEIVED	
LAND OFFICE				
TRANSPORTER   OIL /   GAS /		FEB ; → 1969		
OPERATOR /				
PRORATION OFFICE		O. C. C.		
Operator		<del></del>	ARTESIA, OFFICE	
Penn <b>zo</b>	il United, Inc.			
Address		mama*		
P. 0. 1	D <mark>rawer 1828 - Midland, Te</mark>	Other (Please explain)		
Reason(s) for filing (Check proper box)	Change in Transporter of:		ne of dually completed	
New We!l	Oil Dry Gas		ow formationUpper zone	
Recompletion Change in Ownership	Casinghead Gas Condens			
Change in Ownership				
If change of ownership give name and address of previous owner				
-	A ELACE	mation Kind of Leas State, Feder		
DESCRIPTION OF WELL AND I	Well No. Pool Name, Including For	mation Kind of Leas	se Lease No.	
Mobil "12" Federal	1 Wildcat (Mc	State, Feder	ol or Fee Federal NM-0279	
Location				
Unit Letter B; 6	60 Feet From The North_Line	andFeet From	East	
10	washin 22_C Range 2	26-F , NMPM,	Eddy County	
Line of Section 12 Tow	vnship 23-5 Range 2	(D=E /	<u> Euuy</u>	
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	S		
Name of Authorized Transporter of Oil	or Condensate X	Address (Give address to which appro		
The Permian Corporation	on	P. O. Box 3119 - Midl	and, Texas 79701	
Name of Authorized Transporter of Cas	singhead Gas or Dry Gas 🔏		Address (Give address to which approved copy of this form is to be sent)	
Transwestern Pipeline	Company	P. 0. Box 2521 - Houston, Texas 77001 Is gas actually connected?		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	Is gas actually connected? When Seen 9-10-69	
give location of tanks.	B 12 23-S 26-E	No ges	Seen	
If this production is commingled wi	th that from any other lease or pool,	give commingling order number:		
. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Res	
Designate Type of Completic	on - (X)	<b>x</b>		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
6-29-68	1-8-69	12.735'	11.822'	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	12,735 Top Oil/Gas Pay	Tubing Depth	
3257' RKB	Morrow	11,453'	Depth Casing Shoe	
Perforations		FOO FIO FOE FOT F		
11,453, 455, 457, 463	473, 475, 11,503, 505	508, 513, 535, 537, 5 CEMENTING RECORD	11,000	
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
HOLE SIZE		359	350	
17 1/2"	13 3/8"	5.270	800	
12 1/4" 8 3/4"	9 5/8"	11.850	675	
	2 3/8"	11 345		
TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load o	il and must be equal to or exceed top al	
OIL WELL		epth or be for full 24 hours)  Producing Method (Flow, pump, gas		
Date First New Oil Run To Tanks	Date of Test	Producing Method (1.10m, pamp, and	,	
I are the of Table	Tubing Pressure	Casing Pressure	Choke Size	
Length of Test				
Actual Prod. During Test	Oil-Bhis.	Water-Bbls.	Gas-MCF	
GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Philat Colfedite and Miniot	1	
3,310	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.)	\$	Pkr	Various	
Orifice meter	3,890		VATION COMMISSION	
I. CERTIFICATE OF COMPLIA	NCE	1		
	demonstration of the Oil Conservation	APPROVED	<u>8 1969</u> , 19	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		- 1. ) a. Gressott		
above is true and complete to t	he best of my knowledge and belief.	DIL AND GAS I	NEOCOTOR	
		TITLE	MOFES I VI	
10		This form is to be filed	in compliance with RULE 1104.	
Charles of	Drown		tamenta for a newly drilled or deepe	
(Si.	[nature)	well, this form must be accome tests taken on the well in accome.		
Manager of Drilling	% Production	All sections of this form	must be filled out completely for al	
Manager of Drilling & Production (Title)		able 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.

(Date)

February 21, 1969