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LAND OFFICE	
TRANSPORTER	OIL <input type="checkbox"/> GAS <input type="checkbox"/>
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
RECEIVED

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

APR 26 1972

Operator Corinne Grace		D. C. C. ARTICIA, OFFICE	
Address P.O. Box 1418 Carlsbad, New Mexico			
Reason(s) for filing (Check proper box)		Other (Please explain)	
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 checked="" type="checkbox"/>		

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Panagra Com	Well No. 1	Pool Name, Including Formation Wildcat	Kind of Lease State, Federal or Fee	Lease No. L-1582
Location Unit Letter <u>B</u> ; <u>990</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u>				
Line of Section <u>11</u> Township <u>23 S</u> Range <u>26 E</u> , NMPM, <u>Eddy</u> 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"/>	Address (Give address to which approved copy of this form is to be sent)	
Scurlock Oil Co.	1216 Vaughn Building, Midland, Texas 79701	
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)	
Transwestern Pipeline Company	921 Main at McKinney, Houston, Texas 77001	
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 11
	Twp. 23 S	Rge. 26 E
	Is gas actually connected? <input checked="" type="checkbox"/> Yes	
	When April 20, 1972	

If this production is commingled with that from any other lease or pool, give commingling order number:

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'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded November 14, 1970	Date Compl. Ready to Prod. March 19, 1972		Total Depth 12170		P.B.T.D. 11,231			
Elevations (DF, RKB, RT, GR, etc.) 3283 KB	Name of Producing Formation Canyon and/or Cisco-canyon		Top Oil/Gas Pay gas		Tubing Depth 10,749			
Perforations 10,302-08		10,320-25		Depth Casing Shoe 12140				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2	13 3/8"		350'		200 sacks			
12 1/4	8 5/8"		5400'		3020 sacks			
7 7/8	5 1/2"		12,140'		1290 sacks & NV tool			
7 7/8	2 3/8		10,749					

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 6,520 caof	Length of Test 4 1 hr. rates	Bbls. Condensate/MMCF 8.66	Gravity of Condensate 63.6
Testing Method (pitot, back pr.) 4 pt. back pressure	Tubing Pressure (shut-in) blanking plugs	Casing Pressure (shut-in) 3654	Choke Size Various

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.

Corinne Grace  
(Signature)  
Operator  
(Title)  
4/26/72  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 2-1 1972, 19  
BY H. A. Gressett  
TITLE OIL AND GAS INSPECTOR

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.