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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE RECEIVED
 AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
 MAY 23 1972

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

O. C. C.
 ARTESIA, OFFICE

I. Operator
 Corinne Grace
 Address
 P.O. Box 1418 Carlsbad, New Mexico
 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)

If change of ownership give name
 and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Humble-Grace Com	Well No. 1	Pool Name, including Formation South Carlsbad Morrow	Kind of Lease State, Federal or Fee	State	Lease No. L-1582
Location Unit Letter 'P' ; 990 Feet From The South Line and 660 Feet From The East Line of Section 2 Township 23 S Range 26E , NMPM, 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"/> Scurlock Oil Company	Address (Give address to which approved copy of this form is to be sent) 1216 Vaughn Building, Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline Company	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 70	Sec. 2
	Twp. 23	Rge. 26E
Is gas actually connected?	When	3 2/2/72

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 2/4/71	Date Compl. Ready to Prod. 6/20/71	Total Depth 12,011	P.B.T.D. 11,945					
Elevations (DF, RKB, RT, GR, etc.) 3268 DF	Name of Producing Formation Morrow	Top Oil/Gas Pay 11,680	Tubing Depth 10,616					
Perforations 11,680 -690			Depth Casing Shoe 11,196					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET			SACKS CEMENT			
17 1/2	13 3/8	352			500			
12 1/4	9 5/8	5400			2500			
8 3/4	7	11,196			325			
Liner	4 1/2	11,984			100			

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 CAOF 33,239	Length of Test 4 one hour flow	Bbls. Condensate/MMCF TSTM	Gravity of Condensate
Testing Method (pitot, back pr.) 4 Point	Tubing Pressure (Shut-in) 3475	Casing Pressure (Shut-in) Pkr.	Choke Size

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
 Operator
 (Signature)
 4/19/72
 (Date)

OIL CONSERVATION COMMISSION
 MAY 25 1972
 APPROVED
 BY W. A. Gressett
 TITLE 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.
 Separate Forms C-104 must be filed for each pool in multiply