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SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-116		
FILE		AND		Effective 1-1-65	
U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND N			
LAND OFFICE	1				
TRANSPORTER GAS /			RET	EIVED	
OPERATOR				EINED	
PRORATION OFFICE					
Operator	:1 ./		51,0	1 3 1971	
Morris R. Antwe					
Roy 2010 Hobbs	, New Mexico 88240		<u>.</u>		
Reason(s) for filing (Cheek proper box,		Other (Please	explain)	OFFICE	
New Well	Change in Transporter of:				
Recompletion	Oil Dry Gas	77			
Change in Ownership	Casinghead Gas Congens	sate			
If change of ownership give name					
and address of previous owner					
r DECODIDITION OF WELL AND	T CACC				
I. DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including Fo		Kind of Lease	Lease No.	
Little Jewel Com.	1 South Carlsh	oad(Morrow)	State, Federal or Fe	· Fee	
Location		1000		West	
Unit Letter F : 198	O Feet From The North Line	e and	_ Feet From The	west	
21	washin 22-S Range 2	27-E , NMPM.		Eddy County	
Line of Section 31 To	wnship ZZ-5 Range Z	27-E , NMPM,		200) County	
I. DESIGNATION OF TRANSPOR	TED OF OU AND NATURAL GAS	s			
Name of Authorized Transporter of Oil	or Condensate	Address (Give address t	o which approved co	py of this form is to be sent)	
None					
Name of Authorized Transporter of Ca	singhead Gas or Dry Gas 🔀			py of this form is to be sent)	
Llano, Inc.				Mexico 88240	
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connecte		Sept. 71	
give location of tanks.	<u> </u>	No. yes			
If this production is commingled wi	th that from any other lease or pool,	give commingling order	number: No.	·	
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen Pluc	Back Same Res'v. Diff. Res'v.	
Designate Type of Completi	on $-(X)$	X	1 1		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B	.T.D.	
16 Jan. 71	20 Apr. 71	11,818'		11,786'	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tub	11,393- 2-3/8"	
3189' GL	Morrow	11,441'	Den	th Casing Shoe	
Perforations	The second second second second	15	ļ ·	118 18	
286 /1441 , 11445	11 448 11455, 11462 114 TUBING, CASING, AND	CEMENTING RECOR		11013	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SI	1	SACKS CEMENT	
17-1/2"	13-3/8"	373'		380 sx.	
12-1/4"	9-5/8"	2600'		950 sx.	
8-3/4"	7 11	10708		1170 sx.	
6-1/8"	4-1/2" liner		L818'	150 sx.	
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volu	me of load oil and m	ust be equal to or exceed top allow	
OIL WELL	Date of Test	pth or be for full 24 hours Producing Method (Flow	v. pump. gas lift, etc	.)	
Date First New Oil Run To Tanks	Date of 198t	Producting Memor (1	, panig , p	•	
Length of Test	Tubing Pressure	Casing Pressure	Cho	oke Size	
Length of Test					
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gae	B-MCF	
GAS WELL SICOTA	ine	Bbis. Congensate/MMC	Err Gre	rvity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	BBIs. Condensate/MMC	5.5		
6139 Testing Method (pitot, back pr.)	1 hr.	Casing Pressure (Shut	-in) Ch	oke Size	
Back Pressure	3778 psig.			17/64"	
	3770 9018.	OIL	CONSERVATIO	N COMM SSION	
VI. CERTIFICATE OF COMPL.			00714	1971	
I hereby or that the rules -	gulations of the Oil Conservation	APPROVED		, 19	
Complied to been complied	10-6	a la a gressett			
above is nd complete to the	ne best of my knowledge and belief.		الله عاد كالمشاكرة . الله عاد كالمشاكرة المساكرة ا	- 122374 8	
		TITLE	9 14 . O 2 . C. C	9. <u>20. 0</u>	
	20.	This form is t	o be filed in comp	liance with RULE 1104.	
- Cmivis	76 111 - 1	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			
(Sig	nature)	tests taken on the	Mell IN Sccoldsuc	SO MILL MOLE III.	
Agent		All sections o	f this form must be	e filled out completely for allow	
	Title)	able on new and re	ecompleted wells.		
10 Sept. 71		Fill out only	Sections I, II, III er, or transporter o	i, and VI for changes of ow or other such change of conc	

(Date)

Fill out only Sections I. II. III, and VI for changes of ow well name or number, or transporter, or other such change of cone Separate Forms C-104 must be filed for each pool in muccompleted wells.