

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-70

RECEIVED BY
OCT 04 1983
O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR	
Operator <u>Baruch-Foster Corporation</u>	
Address <u>1160 One Energy Square/4925 Greenville Avenue/Dallas, Texas 75206</u>	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐
Recompletion ☐	
Change in Ownership ☒	Other (Please explain)

If change of ownership give name and address of previous owner Delta Drilling Company/3100-C North "A"/Midland, Texas 79701

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Little Jewell Com</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Carlsbad Morrow, South (Gas)</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No. <u>-</u>
Location Unit Letter <u>F</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>1900</u> Feet From The <u>West</u> Line of Section <u>31</u> Township <u>22S</u> Range <u>27E</u> , N.M.P.M., <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
<u>The Permian Corporation Permian</u> <u>579/1/171</u>	<u>Box 1183/Houston, Texas 77001</u>
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Company</u>	<u>Box 1492/El Paso, Texas 79978</u>
If well produces oil or liquids, give location of tanks.	Unit <u>F</u> Sec. <u>31</u> Twp. <u>22S</u> Rge. <u>27E</u> Is gas actually connected? <u>Yes</u> When <u>October, 1971</u>

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 ☐ Other ☐		
Date Spudded	Date Compl. ready to Prod.	Total Depth	F.B.T.D.
Elevations (DI, RAB, FI, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations	Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Senior Vice-President - Production

September 26, 1983

OIL CONSERVATION DIVISION

APPROVED OCT 2 5 1983, 19

Original Signed By
BY Leslie A. Clements

TITLE Supervisor District II

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 deviated 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 conditions.

Separate Forms C-104 must be filed for each pool in multi-pool wells.