

COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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

AUG 3 1971

I. Operator: **CITIES SERVICE OIL COMPANY** ☒ **O.C.C.**
ARTESIA, OFFICE

Address: **P.O. BOX 69, HOBBS, NEW MEXICO 88240**

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	Well No., Pool Name, Including Formation	Kind of Lease	Lease No.
MERLAND B COM.	1 LINDSEY S. CARLSBAD MORROW	State, Federal or Fee	FEE
Section	Feet From The	Line and	Feet From The
G	1980	NORTH	1980
Section	Township	Range	County
30	22S	27E	EDDY

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Designate Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Designate Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Transwestern Pipeline Co.	No gas connection or transporter at time of this filing. P.O. Box 2521 Houston Texas 77001
If well produces oil or liquids, give count up of tanks.	Is gas actually connected? Yes When 11-10-71

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	Depth	Depth
		X	X				
Date Spudded	Date Comp., Ready to Prod.	Total Depth	FEET TO				
5-15-71	7-24-71	11760	11710				
Flow Test - DE, RKR, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	FEET TO				
3187 DF	MORROW	11340	11710				
Perforations			Depth Casing Head				
11340, 11343, 11345, 11348, 11388, 11390, 11392, 11396, 11397, 11401, 11403, 11405, 11407, 11412, 11420, 11429, 11431, 11433, 11441, 11445, 11463, 11465, 11477, 11479, 11482, 11484			11757				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
17 1/4"	13 3/8"	335	380 sacks				
12 1/4"	9 5/8"	5300	2160 sacks				
8 3/4"	5 1/2"	11758	1000 sacks				

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)

Flow Test - New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Testing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL Flow Test - New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Testing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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.

District Administrative Supervisor

July 28, 1971

OIL CONSERVATION COMMISSION
APPROVED **NOV 15 1971**
BY **W. 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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.