

DISTRIBUTION	5
ANTAFEE	1
FILE	1
R.G.S.	
AND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	2
PRODUCTION OFFICE	1

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

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

RECEIVED

JUN 16 1977

I. Operator Cities Service Company
Address P.O. Box 1919 - Midland, Texas 79702
Reason(s) for filing (check proper box)
☐ New Well
☐ Recompletion
☒ Change in Ownership
☐ Change in Transporter of:
☐ Oil
☐ Gas
☐ Condensate
Other (Please explain) change of operator's name is effective July 1, 1977.

If change of ownership give name and address of previous owner Cities Service Oil Company - P.O. Box 1919 - Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE
Lease Name Merland B Com Well No. 1 Pool Name, Including Formation Carlsbad Morrow South Kind of Lease Fee
Location Unit Letter: G : 1980 Feet From The North Line and 1980 Feet From The East
Line of Section 30 Township 22S Range 27E, N.M.P.M., Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒
none
Name of Authorized Transporter of Gas ☒ or Condensate ☐
Transwestern Pipeline Company (89.8333%)
If well produces oil or liquids, give location of tanks. Unit: G, Sec: 30, Twp: 22S, Rng: 27E
Address (Give address to which approved copy of this form is to be sent)
1st Nat'l Bank, Dallas, Texas 75201
Box 1320 - Hobbs, New Mexico 88240
Is gas actually connected? yes When 11-10-71
4-27-72

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 Rest.	Diff. Rest.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, R&B, RT, 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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

E. Spulder
(Signature)

Region Operations Manager
(Title)

6/10/77
(Date)

OIL CONSERVATION COMMISSION

JUL 20 1977

APPROVED W. A. Gressett
BY W. A. Gressett
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 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 well in multiple