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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

RECEIVED

1973

Form C-104
Supersedes Old C-104 un.
Effective 1-1-65

I.

Operator
The Superior Oil Company

Address
P. O. Box 1900, Midland, Texas 79701

Reason(s) for filing *(Check proper box)*

New Well [X]

Recompletion [ ]

Change in Ownership [ ]

Change in Transporter of:

Oil [ ]   Dry Gas [X]

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.
Ryan	1	Undesignated South Carlsbad (Morrow)	State, Federal or Fee Fee	

Location

Unit Letter D ; 990 Feet From The West Line and 660 Feet From The North

Line of Section 5   Township 23-S   Range 27-E , NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [ ]   or Condensate [XX]

The Permian Corporation (Trucks)

Address *(Give address to which approved copy of this form is to be sent)*
P. O. Box 3119, Midland, Texas 79701

Name of Authorized Transporter of Casinghead Gas [ ]   or Dry Gas [XX]

Llano, Inc.

Address *(Give address to which approved copy of this form is to be sent)*
P. O. Drawer 1320, Hobbs, New Mexico 88240

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When 2-13-73
	D	5	23-S	27-E	~~No~~ Yes	Estimated Jan., 1973

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	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
9-1-72	12-30-72	11,915'	11,825'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
RKB: 3196'	Morrow	11,174'	11,610'

Perforations	Depth Casing Shoe
Morrow Zone 11,750'-11,760'	11,915'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	51'	4 cubic yards concrete
17-1/2"	13-3/8"	350'	400 sax-circ to surface
12-1/4"	9-5/8"	5,493'	1975 sax-top cmt @900'
8-1/2"	7"	11,915'	286 sax-top cmt @9600'
	2-7/8"	11,610' Tail at 11,638'	

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
915	2 hr	14.3	56
Testing Method *(pitot, back pr.)*	Tubing Pressure **(Shut-in)**	Casing Pressure **(Shut-in)**	Choke Size
Production Test	3938	Packer	9/64"

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.

T. D. Clay
(Signature)   T. D. Clay

Petroleum Engineer
(Title)

January 22, 1973
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 20 1973 , 19 ___

BY *W. A. Grissett*

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.