

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

RECEIVED

AUG 6 1973

DISTRIBUTION	
SANTA FE	
FILE	1 ✓
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS 1
OPERATOR	
PRORATION OFFICE	1

Exxon Corporation ✓ **O. C. C.**
ARTESIA, OFFICE

Address
P. O. Box 1600, Midland, Texas 79701

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
South Carlsbad Gas Com. No. 1	1	South Carlsbad Morrow	State, Federal or Fee Fee
Location			
Unit Letter N	1,980 Feet From The West	Line and 990 Feet From The South	
Line of Section 23	Township 23-S	Range 26-E	NMPM, Eddy County

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of 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)		
Name of 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)		
El Paso Natural Gas Co.	Box 1382 Jal, New Mexico		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp. Rge.
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Is gas actually connected?	When 10-15-73		Approx. 9-1-73

If this production is commingled with that from any other lease or pool, give commingling order number:

III. 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 4-14-73	Date Compl. Ready to Prod. 6-21-73	Total Depth 11,991	P.B.T.D. 11,847					
Pool South Carlsbad Morrow	Name of Producing Formation Morrow	Top Oil/Gas Pay 11,433	Tubing Depth None TX-40					
Perforations 11,433 - 11,797	Depth Casing Shoe 11,990							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
15"	11 3/4"	610		400				
10 5/8"	8 5/8"	5,295		900				
7 7/8"	3 1/2"	11,990		1,850				

IV. 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 943	Length of Test 5 hours	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (per, back pr.)	Tubing Pressure -	Casing Pressure Tubingless	Choke Size 12/64, 10/64, 8/64, 5/64

V. 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.


(Signature)
UNIT HEAD
(Title)
7-31-73
(Date)

OIL CONSERVATION COMMISSION

OCT 18 1973

APPROVED _____, 19

BY **W. A. Gussert**

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 Sections I, II, III, and VI only 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.