

DATE 1/1/76
O.S.
D OFFICE
TRANSPORTER OIL GAS
OPERATOR
PRORATION OFFICE

RECEIVED
OIL CONSERVATION COMMISSION
ALLOWABLE
AUTHORIZATION TO PRODUCE OIL AND NATURAL GAS

Form 1104
Supersedes Old C-104 and C-105
Effective 1-1-65

RECEIVED

FEB 5 1976

I. OPERATOR
Operator Texas International Petroleum Corporation
Address P. O. Box 4520, Centenary Station, Shreveport, Louisiana 71104
Reason(s) for filing (Check proper box)
New Well ☐ Charge in Transporter ☐ Other (Please explain)
Recompletion ☒ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Other ☐
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name Allied State Well No. 1 Pool Name South Carlsbad Morrow Gas Middle Morrow Kind of Lease State, Federal or Free State Lease No. K-4538
Location Unit Letter I ; 1980 Feet From The South 990 Feet From The East
Line of Section 10 Township 23S Range 26E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☐ Give address to which approved copy of this form is to be sent
E
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Give address to which approved copy of this form is to be sent
El Paso Natural Gas Co. P. O. Box 1384, Jal, New Mexico
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is it directly connected? When 1-28-76 1-11-74
Yes

IV. COMPLETION DATA
Designate Type of Completion - (X) Oil Well Gas Well Workover Deepen Plug Back Same Resrv. Diff. Resrv.
NA 1-29-76 11,935 11,908
Elevations (DF, RKB, RT, GR, etc.) 3300 GL Name of Producing Formation Middle Morrow Gas Pay 11,651' (top perfs) Tubing Depth 11,620
Perforations 11,651-657' & 11,663-671' Depth Casing Shoe 11,492 11935
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17-1/2 13-3/8 419 400 - surface
11 8-5/8 5,430 820
7-7/8 5-1/2 11,935 640
2 3/8" 11620 w/ pkr 11620

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL
(Test must be at least 24 hours 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 Production Method (Flow, pump, gas lift, etc.)
Length of Test Tubing Pressure Casing Pressure Choke Size
Actual Prod. During Test Oil-Bbls. Gas-Bbls. Gas-MCF

GAS WELL
Actual Prod. Test-MCF/D Length of Test 4 hour Bbls. Condensate/MMCF Gravity of Condensate
685 -0- -0-
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size
back pressure 3650 -0- 16/64

1. 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)
Manager of Drilling
(Title)
January 30, 1976
(Date)

OIL CONSERVATION COMMISSION
FEB 5 1976
APPROVED BY W. A. Gressett
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.