

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

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

OCT 21 1974

Operator Cities Service Oil Company		O. C. C.
Address Box 1919 - Midland, Texas 79701		ARTESIA, OFFICE
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Originally drilled and completed by Apexco, Inc. Cities Service received ownership effective 9-12-74....
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner Apexco, Inc. - 1121 First Place - Tulsa, Oklahoma 74103

I. DESCRIPTION OF WELL AND LEASE

Lease Name Walterschied	Well No. 1	Pool Name, Including Formation Wildcat - Morrow	Kind of Lease State, Federal or Fee	Lease No. ---
Location				
Unit Letter G	2240	Feet From The North	Line and 1830	Feet From The East
Line of Section 35	Township 22S	Range 27E	, 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 Company	Box 1492 - El Paso, Texas 79978	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected?	When
	yes	12-21-74

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

II. 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					X
Date Spudded 5-31-74	Date Compl. Ready to Prod. 9-6-74	Total Depth 12,460'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3083' GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 11958'	Tubing Depth 11940'					
Perforations 4-0.42" holes per ft. @ 11,958' - 11,968'			Depth Casing Shoe 12,160'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
15"	12-3/4"	363'	240 sacks					
12"	9-5/8"	4576'	1050 sacks					
8-3/4"	4-1/2"	12160'	675 sacks					

III. 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 C.A.O. F. 9,335	Length of Test 4 Hrs.	Bbls. Condensate/MMCF ---	Gravity of Condensate ---
Testing Method (pilot, back pr.) Back pressure	Tubing Pressure (Shut-in) 3820#	Casing Pressure (Shut-in) ---	Choke Size 6/64", 9/64", 12/64" & 11/64"

IV. 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.

John Forsyth  
(Signature)  
Region Operation Manager  
(Title)  
October 15, 1974  
(Date)

OIL CONSERVATION COMMISSION	
DEC 30 1974	
APPROVED	19
BY <u>W. A. Gussitt</u>	
TITLE <u>OIL AND GAS INSPECTOR</u>	
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.	