

DISTRIBUTION			
ANTAF			
ILE			
S.G.S.			
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

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

AUG 8 1974

I.

Operator		O. C. C.	
Address		ARTESIA, OFFICE	
701 Wilco Bldg. - Midland, Texas 79701			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:		
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of ownership give name and address of previous owner

R-5162 3-1-74

II. DESCRIPTION OF WELL AND LEASE

East Carlsted-Morrow Gas

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Nix-Yates	1	Undesignated (Morrow)	State, Federal or Fee	Fee
Location				
Unit Letter	G	1980'	Feet From The North	Line and 1980'
			Feet From The East	
Line of Section	2	Township	22-S	Range
			27-E	NMPM, Eddy
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
The Permian Corporation Permian (Eff. 9 / 1 / 87)	Box-1183, Houston, Texas 77001	
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 79999	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	G	2
	22-S	27-E
	Yes	8-1-74

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'v.	Diff. Rest'v.
		X	X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
3-27-74	7-23-74		11,971'		11,823'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3113' DF	Morrow		11,490'		11,300'			
Perforations					Depth Casing Shoe			
11,490-11,756'					11,963'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		449'		550			
12-1/4"	9-5/8"		2640'		1700			
8-3/4"	7"		11,963'		735			
7" Csg.	2-7/8"		11,300'					

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
1828	4 hours	1.5	55
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Back Pressure	3347 (Morrow)	3500 (Wolfcamp)	Orifice Meter

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.

Walter M. ...
(Signature)

District Clerk

(Title)

August 7, 1974

(Date)

OIL CONSERVATION COMMISSION

AUG 20 1974

APPROVED BY W. A. Gressett, 19

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 deep well, this form must be accompanied by a tabulation of the devils tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of cor. Separate Forms C-104 must be filed for each well in a