

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

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OPERATOR	/
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I. Operator **O. C. C. ARTERIA, OFFICE**
Orla Petco, Inc.
 Address **Box 953, 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) **CASINGHEAD GAS MUST NOT BE FLARED AFTER 4-19-78 UNLESS AN EXCEPTION TO Rule 306 IS OBTAINED Ex. # 2-270**
 If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE **R-5729**
 Lease Name **Gourley-Federal** Well No. **1** Pool Name, Including Formation **Herradura Bend (Delaware)** Kind of Lease **Federal** Lease No. **NM-26684**
 Location
 Unit Letter **H**; **2310** Feet From The **North** Line and **330** Feet From The **East**
 Line of Section **31** Township **22 South** Range **28 East**, NMPM, **Eddy** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil or Condensate
The Permian Corp. Address (Give address to which approved copy of this form is to be sent) **Box 1183, Houston, TX 77001**
 Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) _____
 If well produces oil or liquids, give location of tanks. Unit **H** Sec. **31** Twp. **22-S** Rge. **28-E** Is gas actually connected? **No** When _____

IV. COMPLETION DATA
 Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
 Date Spudded **1-6-78** Date Compl. Ready to Prod. **2-18-78** Total Depth **2449 feet** P.B.T.D. _____
 Elevations (DF, RKB, RT, GR, etc.) **3053 GR** Name of Producing Formation **Delaware (Ramsey) Sand** Top Oil/Gas Pay **2447 feet** Tubing Depth **2434 feet**
 Perforations **OPEN HOLE 2442-49** Depth Casing Shoe **2442 feet**
 TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
10 3/4"	8 5/8"	365'	250 sx Class "C"
8"	4 1/2"	2442'	125 sx
	2 3/8"	2434'	packer

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 **2-18-78** Date of Test **2-20-78** Producing Method (Flow, pump, gas lift, etc.) **Flow**
 Length of Test **24 hours** Tubing Pressure **40#** Casing Pressure **100#** Choke Size **3/4"**
 Actual Prod. During Test Oil-Bbls. **83** Water-Bbls. **4** Gas-MCF **6**

GAS WELL
 Actual Prod. Test-MCF/D _____ Length of Test _____ Bbls. Condensate/MMCF _____ Gravity of Condensate _____
 Testing Method (pitot, back pr.) _____ Tubing Pressure (shut-in) _____ Casing Pressure (shut-in) _____ Choke Size _____

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.
A. H. Hedden Vice-President
 Signature **A. H. Hedden**
 Title **2-24-78**
 Date **(Date)**

OIL CONSERVATION COMMISSION
 APPROVED **FEB 27, 1978**
 BY **W. A. Gressett**
 TITLE **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.
 Separate Forms C-104 must be filed for each pool in multiply