

**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

SANTA FE	/	/
FILE	/	/
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	/
OPERATOR		/
PRORATION OFFICE		

RECEIVED

Operator
Black River Corporation ✓

Address
620 Commercial Bank Tower, 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)
**O. C. C.
ARTESIA, OFFICE**

OCT 11 1978

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name Miller Com	Well No. 1	Pool Name, including Formation Canyon	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter C ; 760 Feet From The North Line and 2080 Feet From The West Line of Section 10 Township 23S Range 27E , NMPM, Eddy County				

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	P. O. Box 1492, El Paso, Texas 79978	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 10
	Twp. 23S	Rge. 27E
	Is gas actually connected? Yes	When 10-10-78

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

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		X
Date Spudded 5-22-78	Date Compl. Ready to Prod. 10-10-78	Total Depth 12,350	P.B.T.D. 11,160					
Elevations (DF, RKB, RT, GR, etc.) 3101.7 Ground level	Name of Producing Formation Canyon	Top Oil/Gas Pay 9896'	Tubing Depth 9545'					
Perforations 9896 - 9906, 9924 - 9932, 2 shots per foot						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	349'	400 SX
12 1/4"	10 3/4"	5635'	1550 sx & 300 sx neat
9 1/2"	7 5/8" liner	5410' to 11,497'	770
6 1/2"	5" liner	11,367' to 12,349'	150

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 750	Length of Test 24 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Flowing	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) Packed off	Choke Size

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.

Ronnie Lowders
(Signature)
V.P.
(Title)
10-10-78
(Date)

OIL CONSERVATION COMMISSION

APPROVED **OCT 18 1978**, 19____
BY *W. A. Gussitt*
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 completed wells.