

DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION		Form C-104	
SANTA FE		REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-110	
FILE		AND		Effective 1-1-65	
U.S.G.S.		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE				RECEIVED	
TRANSPORTER				DEC 20 1979	
OIL					
GAS					
OPERATOR					
PRORATION OFFICE					
Operator					
Alpha Twenty-One Production Company					
Address					
2100 First National Bank Building, Midland, Texas 79701					
ARTESIA, OFFICE					
Reason(s) for filing (Check proper box)					
New Well					
Recompletion					
Change in Ownership					
Change in Transporter of:					
Oil					
Dry Gas					
Casinghead Gas					
Condensate					
Other (Please explain)					
If change of ownership give name and address of previous owner					
Black River Corporation, 2100 First National Bank Building					
Midland, Texas 79701					
DESCRIPTION OF WELL AND LEASE					
Lesse Name					
Cerro Com.					
Well No.					
1					
Pool Name, including Formation					
Cass Draw - Wolfcamp					
Kind of Lease					
State, Federal or Fee					
Fee					
Lease No.					
Location					
Unit Letter					
E					
2080 Feet From The					
North					
Line and					
760					
Feet From The					
West					
Line of Section					
11					
Township					
23-S					
Range					
27-E					
, NMPM,					
Eddy					
County					
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil					
or Condensate					
Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas					
or Dry Gas					
El Paso Natural Gas Company					
Address (Give address to which approved copy of this form is to be sent)					
Box 1492, El Paso, Texas 79978					
If well produces oil or liquids, give location of tanks.					
Unit					
E					
Sec.					
11					
Twp.					
23S					
Pge.					
27E					
Is gas actually connected?					
Yes					
When					
04-06-79					
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.					
Date Spudded					
08-20-78					
Date Compl. Ready to Prod.					
12-21-78					
Total Depth					
12,401					
P.B.T.D.					
11,605					
Elevations (DF, RKB, RT, CR, etc.)					
3092.4					
Name of Producing Formation					
Wolfcamp					
Top Oil/Gas Pay					
10,214					
Tubing Depth					
10,140					
Perforations					
10,214 to 10,222 - 3 holes per foot .26" diam.					
Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE					
CASING & TUBING SIZE					
DEPTH SET					
SACKS CEMENT					
17-1/2"					
13-3/8"					
374					
400 C					
12-1/4"					
10-3/4"					
5660					
1730 ltr & 200 C					
9-1/2"					
7-5/8" liner					
5322 to 11720					
925 ltr & 460 H					
6-1/2"					
5" liner					
11362 to 12401					
150 H					
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-Bble.					
Water-Bble.					
Gas-MCF					
GAS WELL					
Actual Prod. Test-MCF/D					
Length of Test					
Bble. Condensate/MMCF					
Gravity of Condensate					
Testing Method (pilot, back pr.)					
Tubing Pressure (Shut-in)					
Casing Pressure (Shut-in)					
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.					
Tommy Phillips					
(Signature)					
Executive Vice President					
(Title)					
December 17, 1979					
(Date)					
OIL CONSERVATION COMMISSION					
APPROVED					
BY					
TITLE					
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 recompleted wells.					