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LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
OPERATOR		/
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-105
Effective 1-1-65

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DEC 6 1980

I.

Operator

Maddox Energy Corporation /

Address

Suite 906 Blanks Building, 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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Queen "B"	1	S. Culebra Bluff, Bone Spring	State, Federal or Fee Fee	
Location				
Unit Letter	D	: 760 Feet From The north Line and 990 Feet From The west		
Line of Section	26	Township 23-S	Range 28-E	NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Permian Corporation		Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.		Box 1492, El Paso, Texas 79978
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 26
	Twp. 23-S	Rge. 28-E
		Is gas actually connected? When
		No Yes Approx. 1/1/81

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'y.	Diff. Rest'y.
X	X		X	Reentry				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
10/10/80	10/26/80	7063	6790					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3022.5 GL	Bone Spring	6406	6205					
Perforations	Depth Casing Shoe							
6406-18, 6441-66, 6520-63, 6568-6602, 6607-38, 6652-76'	6855							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
	13 3/8"	48#	370		425			
	8 5/8"	24#	2599		1000			
7 7/8"	4 1/2"	10.5# & 11.6#	6855		850			

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.)	
10/26/80	11/29/80	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	120#	Packer	1/2"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	29	0	119

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

Quadrat B. Cury
(Signature)

Operations Manager
(Title)

December 3, 1980
(Date)

OIL CONSERVATION COMMISSION

DEC 7 1980

APPROVED

BY

OIL AND GAS INSPECTION

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 Form C-104 must be filed for each pool in multiple completed wells.