

NO. OF COPIES RECEIVED	4
DISTRIBUTION	
SANTA FE	✓
FILE	✓
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	✓
PROSATION 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-110
Effective 1-1-65

AUG 21 1978

Operator	J. C. Barnes Oil Company ✓	O. C. C. ARTEZIA, OFFICE
Address	P. O. Box 505 Midland, TX 79702	
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 _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Big Chief Comm.	1	Wildcat - Morrow	State, Federal or Fee Fee	
Location:				
Unit Letter	1980	Feet From The	N	Line and 1980 Feet From The
Line of Section	22	Township	22 S	Range 28 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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
No contract						
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 Nat. Gas Co.	600 Bldg. of Southwest, Midland, TX 79701					
If well produces oil or liquids, give location of bottom	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	22	22 S	28 E	Yes	August 15, 1978

If this production is commingled with that from any other lease or pool, give commingling order number: No

IV. 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					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
March 28, 1978	August 9, 1978		12,733'					
Elevations (DE, R.R., RT, CR, etc.)	Name of Producing Formation		Top G2/Gas Pay		Tubing Depth			
3095' C.R.	Morrow		12,150'		12,106.00'			
Perforations					Depth Casing Shoe			
(12670-71) (12652-64) (12322-336) (12270-274) (12216-226) (12150-159)					12,733'			
2 3/8 EVE S&L Tubing -12,106'					TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
24"	20"		39'		3 yds. concrete			
17 1/2"	13 3/8" 54#		340'		375 sx			
12 1/4"	10 3/4" 51#		2,560'		750 sx			
9 1/2" hole to 10400 - Rest 7 3/4" 5 1/2" 17&20#			12,733'		1450 sx			

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. TUB - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
4.4	12 Hrs.	Unable to measure	
Testing Method (Flow, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Flow Test	4050	0	16/64

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.


(Signature)

Field _____

(Title)

August 15, 1978

(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 31 1978, 19

BY W. A. Gussert

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.