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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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FEB 11 1980

O. C. O.

ARTESIA, NEW MEXICO

Operator Orla Petco, Inc. & Hopi Drilling Company	
Address P.O. Box 953, Midland, Texas 79702	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

IS OBTAINED

2-2-364

II. DESCRIPTION OF WELL AND LEASE

Lease Name C-S Federal	Well No. 2	Pool Name, Including Formation Herradura Bend (Delaware)	Kind of Lease State, Federal or Fee Federal	Lease No. NM-26684
Location Unit Letter <u>P</u> : <u>990</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>East</u> Line of Section <u>31</u> Township <u>22S</u> Range <u>28E</u> , NMPM, <u>Eddy</u> 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, Texas 77001	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 0	Sec. 31
	Twp. 22S	Rge. 28E
	Is gas actually connected? No	
	When	

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 Restv.	Diff. Restv.
	XXXXXX		XXXXXX				XXXXXX	
Date Spudded 12/4/79	Date Compl. Ready to Prod. 1/25/80		Total Depth 2441' (Log)		P.B.T.D. 2441'			
Elevations (DF, RKB, RT, GR, etc.) 3048.0' GR.	Name of Producing Formation Delaware Sand (Ramsey)		Top Oil/Gas Pay 2428		Tubing Depth 2426'			
Perforations Open Hole					Depth Casing Shoe 2428'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
10"	8 5/8"		367'		250 sx Class C, 2% CaCl			
8"	5 1/2"		2428'		450 sx cement			
5 1/2"	2 3/8"		2426'					

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 1/25/80	Date of Test 1/25/80	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure -----	Casing Pressure -----	Choke Size -----
Actual Prod. During Test 22 bbls.	Oil - Bbls. 20	Water - Bbls. 2	Gas - MCF -----

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.

James H. C. Butler
(Signature)
Vice-President
(Title)

February 4, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED

FEB 11 1980

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BY

W. A. Gussert
SUPERVISOR, DISTRICT II

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