

DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION	Form C-104
ANTA FC	REQUEST FOR ALLOWABLE	Supersedes Old C-104 and C-110
FILE	AND	Effective 1-1-85
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROBATION OFFICE		

Operator	Alpha Twenty-One Production Company
Address	2100 First National Bank Building, Midland, Texas 79701
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well	Change in Transporter of:
Recompletion	Oil
Change in Ownership	Casinghead Gas
	Dry Gas
	Condensate

If change of ownership give name and address of previous owner	Black River Corporation, 2100 First National Bank Building, Midland, Texas 79701
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Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Cities E Federal	1	Washington Ranch - Morrow	State, Federal or Fee Federal NM	0456187
Location				
Unit Letter	E	2080 Feet From The	North Line and	660 Feet From The
Line of Section	35	Township	25-S	Range
				24-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	Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Company		Box 1492, El Paso, Texas 79978		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.
Is gas actually connected?	When			
Yes	05-03-72			

If this production is commingled with that from any other lease or pool, give commingling order number:	
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COMPLETION DATA									
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.	
		X							
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.						
02-15-72	03-13-72	7066	7011						
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth						
3689 RKB	Morrow	6923	6974						
Perforations	Depth Casing Shoe								

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11	8-5/8	730	325
7-7/8	4-1/2	7065	125

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE	OIL CONSERVATION COMMISSION
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.	APPROVED
	DEC 20 1979
	BY
	W. A. Lussert
	TITLE
	SUPERVISOR, DISTRICT II
Tommy Phipps	This form is to be filed in compliance with RULE 1104.
Executive Vice President	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.
December 17, 1979	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.