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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE **RECEIVED**
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
MAY 12 1972

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

O. C. C.
ARTESIA, OFFICE

I. Operator
CITIES SERVICE OIL COMPANY

Address
BOX 69, Hobbs, N.M. 88240

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of
Recompletion ☐ Oil
Change in Ownership ☐ Casinghead Gas ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name	Lease	Lease No.
GOVERNMENT M	2	Washington Ranch Morrow	Fed	NM04722580
Location	Unit Letter	Feet From The	Feet From The	Count
	N	660	South	1980
			West	
Line of Section	Township	Range	County	
27	25S	24E	Eddy	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ (If no transporter is designated, a copy of this form is to be sent)

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ (If no transporter is designated, a copy of this form is to be sent)

No gas connection at the time of this filing

If well produces oil or liquids, give location of tanks. **No**

If this production is commingled with that from any other lease or pool, give name and location of other lease or pool

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	Plug Back	Same Res'v.	Diff. Res'v.
	X	X		X	
Date Spudded	Date Compl. Ready to Prod.	Depth	P.B.T.D.		
3-28-72	5-4-72	6980'		6950'	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Tubing Depth		
3731 DF	Morrow	6815	6751		
Perforations			Depth Casing Shoe		
1 - 0.33" Hole Each @ 6815, 6819, 6823, 6827, 6843, 6849, 6852, 6855, 6860, 6863, 6874, 6878, 6882, and 6888			6979'		
TUBING, CASING, AND CEMENT RECORD					
HOLE SIZE	CASING & TUBING SIZE	DATE	SACKS CEMENT		
18"	13 3/8"	40'	8 Yds Redimix		
11"	8 5/8"	749'	200 sxs + 7 1/2 yds Redimix		
7 7/8"	5 1/2"	6979'	350 sxs		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be done on recovery of total volume of fluid oil and must be equal to or exceed top allowable for the depth of the well)

Date First New Oil Run To Tanks	Date of Test	Flow Rate (bbls./day, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Gas - MCF	

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Gravity of Gas
C.A.O.F. 10.821 MMCFD	4 hrs.	Sp. Grav. 0.570
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Choke Size
Back Pressure	2459 psi	18/64", 20/64", 24/64" & 29/64"

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

APPROVED **MAY 20 1972**, 19

W. A. Gressett
OIL AND GAS INSPECTOR

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 data 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, number, or transporter or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply

(Signature)

Dist. Admin. Supervisor

(Title)

May 8, 1972

(Date)