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

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

FILE		AND		
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS RECEIVED			
LAND OFFICE				
TRANSPORTER OIL				
GAS				
OPERATOR		MAY 1	6.13 7 1	
PRORATION OFFICE		IAICA (*	·	
Operator		0.0	_	
J. C. Willia	E399	O. C	DEFICE	
	Midland Yamaa 707		111.02	
Reason(s) for filing (Check proper	har)	Other (Please explain	.)	
New Well	Change in Transporter of:			
Recompletion	Oil Dry C	Gas		
Change in Ownership	Casinghead Gas Cond	ensate 🔲		
If change of ownership give name and address of previous owner _	ne			
and address of previous emiss.				
. DESCRIPTION OF WELL A	ND LEASE	174-3-6	S. J.	
Lease Name	Well No. Pool Name, Including		f Lease Lease No.	
Ross Draw Unit	1 Wildcat-Del	aware Sand State,	Federal or Fee Federal MM 11042	
Location	An Annah	1000	14 - a A	
Unit Letter;	Feet From The South L	ine and 1960 Feet	From The West	
49	448 D	300 MMDM	County	
Line of Section 27	Township 265 Range	30E , NMPM,	County	
DECIGNATION OF TRANSP	ORTER OF OIL AND NATURAL G	AS		
Name of Authorized Transporter of	f Oil or Condensate	Address (Give address to which	approved copy of this form is to be sent)	
Name of Authorized Transporter of	f Casinghead Gas or Dry Gas	Address (Give address to which	approved copy of this form is to be sent)	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
give location of tanks.		No	1	
If this production is commingled	i with that from any other lease or poo	l, give commingling order numbe	er:	
V. COMPLETION DATA				
	Oil Well Gas Well	New Well Workover Deep	pen Plug Back Same Restv. Diff. Restv.	
Designate Type of Comp		X	5.7.5.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
12-23-73	3-23-74	3493'	Tubing Depth	
Elevations (DF, RKB, RT, GR, et		Top Oil/Gas Pay		
2008.2 DF	Delaware Sand	3444'	Depth Casing Shoe	
Perforations	1404		3491'	
38 holes 3444-3		ND CEMENTING RECORD	343	
7101 5 5175	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
HOLE SIZE	10 3/4*	758'	1000	
707/80	\$ 1/2	3493'	100	
	2 3/8"	3472'		
THE DAME AND REQUES	T FOR ALLOWARIE (Test must be	after recovery of total volume of lo	oad oil and must be equal to or exceed top allow	
OIL WELL	able for this	deput of be jor just 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	
			Gas-MCF	
Actual Prod. During Test	Otl-Bbls.	Water - Bbls.	Gda-Mor	
GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test			
902 MCFB	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size Orifice	
Testing Method (pitot, back pr.)	1552	Pkr.	1/8. 3/16. 7/32 A	
			ERVATION COMMISSION 1/4	
I. CERTIFICATE OF COMPL	IANCE	OIL CONS	EKAN HOM COMMUNICATION 114	
		APPROVED	, 19	
o lestes bose compl	and regulations of the Oil Conservation ied with and that the information give			
above is true and complete t	o the best of my knowledge and belie	f. BY		
• •				
e.		Hi .		
The state of the s	17	This form is to be fit	led in compliance with RULE 1104.	
1 history		11		
J / L L L L L L L L L L L L L L L L L L	Med	II to all I farm mane he es	coompanied by a labulation of the design.	
Shirling ((Signature)	well, this form must be at tests taken on the well is	or allowable for a newly drilled or deependoncompanied by a tabulation of the deviation accordance with RULE 111. Form must be filled out completely for allow	

(Title)

(Date)

4-4-74

All sections of this form must be able 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.