

SANTA FE		5
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
OPERATOR		/
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

I. Operator
WILLIAM C. RUSSELL
Address
1775 Broadway, New York, New York 10019
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name GRAHAM (NM-05791)	Well No. 51	Pool Name, Including Formation Largo Chacra	Kind of Lease State, Federal or Fee Fed.
Location Unit Letter G ; 1620 Feet From The North Line and 1815 Feet From The East Line of Section 10 , Township 27 North Range 8 West , NMPM, San Juan County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Inland Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1528 Farmington, N. M.					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 990 Farmington, N. M.					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					No	

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 Res'v.	Diff. Res'v.
		X	X					
Date Spudded 6-26-72	Date Compl. Ready to Prod. 7-13-72		Total Depth 4600		P.B.T.D. 4500			
Pool Largo	Name of Producing Formation Chacra		Top Oil/Gas Pay 3109		Tubing Depth none			
Perforations 3109-3114, 3131-3141					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-3/4	8-5/8 x 24#	272	180
7-7/8	4-1/2 x 11.6#	4600	475
	2-3/8 tubing	4500	stage collar 3250
	Packer	3200	

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. Test-MCF/D 2,000 MCF estimated - back pressure test to be	Length of Test	Bbls. Condensate	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure 1010#	Casing Pressure 1020#	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.

William C. Russell
(Signature)

OPERATOR

July 20, 1972

(Date)

OIL CONSERVATION COMMISSION

SEP 7 1972

APPROVED _____, 19____

BY **Original Signed by Emery C. Arnold**

TITLE **SUPERVISOR DIST. #3**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepener 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 Sections I, II, III, and VI only 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.