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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

I. Operator
D. J. Simmons, et al
Address
3590 McCart St., Fort Worth, Texas
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Simmons - (P.C.)	Well No. 4	Pool Name, Including Formation Blanco - P.C.	Kind of Lease XXX Federal XXX	Lease No. SF080000-A
Location Unit Letter E ; 1550 Feet From The North Line and 920 Feet From The West Line of Section 23 Township 29N Range 9W , 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"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) 1909 Bloomfield Blvd., Farmington, N.M.					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural	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 E	Sec. 23	Twp. 29N	Rge. 9W	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 Res'v.	Diff. Res'v.
		X	X					
Date Spudded 11-28-66	Date Compl. Ready to Prod. 12-29-66	Total Depth 2515	P.B.T.D. 2451					
Elevations (DF, RKB, RT, GR, etc.) 5802 K.B.	Name of Producing Formation Pictured Cliffs Sand	Top Oil/Gas Pay 2288	Tubing Depth 2270					
Perforations 2293-2348	Depth Casing Shoe 2501							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	120'	100					
6-3/4"	4-1/2"	2501	300					
	1-1/4"	2270						

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 A.O.F. 4,034 MCF/D

Actual Prod. Test-MCF/D 3,611	Length of Test 3 hrs.	Bbls. Condensate/MMCF None	Gravity of Condensate --
Testing Method (pilot, back pr.) Back Pr.	Tubing Pressure (shut-in) 886	Casing Pressure (shut-in) 886	Choke Size 3/4"

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.

A. B. Geran, Jr.

A. B. Geran, Jr.
(Signature)

Superintendent
(Title)

January 23, 1967
(Date)

OIL CONSERVATION COMMISSION
FEB 2 1967

APPROVED
BY Original Signed by Emery C. Arnold
SUPERVISOR DIST. 3
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 completed wells.