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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

**RECEIVED**

**MAY 3 1965**

**I. OPERATOR**

Operator: Petroleum Corporation of Texas ✓

Address: P. O. Box 752, Breckenridge, 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): Change of Operating Name effective May 1, 1965

If change of ownership give name and address of previous owner: Graridge Corporation, P. O. Box 752, Breckenridge, Texas

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
<u>Hanson Federal Sec. 25 #1E-969292-B</u>	<u>11</u>	<u>Mason Delaware, North Eddy</u>	<u>State, Federal or Fee Federal</u>
Location			
Unit Letter		Feet From The	Feet From The
<u>C</u>	<u>990</u>	<u>North</u> Line and	<u>1650</u> Feet From The <u>West</u>
Line of Section	Township	Range	County
<u>25</u>	<u>26S</u>	<u>31E</u>	<u>Eddy</u>

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Western Oil Trans. Co., Inc.</u>	<u>P. O. Box 3120, Midland, Texas</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Phillips Petroleum Company</u>	<u>Room B-2, Phillips Bldg., Odessa, Texas</u>
If well produces oil or liquids, give location of tanks.	Unit    Sec.    Twp.    Rge.    Is gas actually connected?    When
	<u>F</u> <u>25</u> <u>26S</u> <u>31E</u> <u>Yes</u> <u>February 1, 1960</u>

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.
<input checked="" type="checkbox"/>								
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
Pool	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth				
Perforations						Depth Casing Shoe		

**TUBING, CASING, AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

**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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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.

Charles W. Smith  
(Signature) Charles W. Smith  
Office Manager  
(Title)  
May 1, 1965  
(Date)

**OIL CONSERVATION COMMISSION**

APPROVED JUN 2 1965, 19\_\_\_\_

BY M. L. Armstrong

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 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.