| · · · · · · · · · · · · · · · · · · ·   | <b></b>  | پیسیر   | 16  |  |
|---|--|---|---|--|
| DISTRIBUTION  |  |   |   |  |
| SANTA FE  |  | CONSERVATION COMMISSION   | Form C-104  |  |
| FILE  | REQUES   | T FOR ALLOWABLE   | Supersedes Old C-104 and C-   |  |
| U.S.G.S.  | AUTHORIZATION TO TE  | AND<br>RANSPORT OIL AND NATURAL                                       | RETETED   |  |
| LAND OFFICE   |  | CANSFORT OIL AND NATURAL  | , GAS   |  |
| TRANSPORTER OIL   | ·  |   | JAN 2 6 1967  |  |
| GAS   |  |   | 1 1 1 1 1 1 1 1 1 1 1 1 1   |  |
| PROBATION OFFICE  |  |   | O. C. C.  |  |
| Operator  |  |   | ARTESIA, OFFICM   |  |
| Southwest Production  | n Corporation  |   |   |  |
| Address   |  | · · · · · · · · · · · · · · · · · · ·                                 |   |  |
| 1201 West McGaffey,   | Roswell, New Mexico  |   |   |  |
| Reason(s) for filing (Check proper  |  | Other (Please explain)  |   |  |
| New Well X<br>Recompletion  | Change in Transporter of:<br>Oil Dry G   |   |   |  |
| Change in Ownership   |  | ensate  | •   |  |
|   |  |   |   |  |
| If change of ownership give name<br>and address of previous owner   | e ,  |   | · · ·   |  |
|   |  | ••••••••••••••••••••••••••••••••••••••                                | <u> </u>  |  |
| . DESCRIPTION OF WELL AN  |  |   |   |  |
| Lease Name  | Well No. Pool Name, Including I  |   |   |  |
| Lowe "B" State  | 1 Artesia, Gray  | burg, San Andres State, Feder   | ral or Fee State OG 605   |  |
|   | 20   |   |   |  |
| Unit Letter "B" ; 3   | 30 Feet From The North Li  | ine and <u>2310</u> Feet From   | The East.   |  |
| Line of Section 4   | Township 198 Range   | 28E , NMPM.   | Eddy County   |  |
| <b></b>   |  |   |   |  |
| DESIGNATION OF TRANSPO  | ORTER OF OIL AND NATURAL G   |   |   |  |
| Name of Authorized Transporter of   | Oil 🚺 or Condensate 🗔  | Address (Give address to which appr                                   |   |  |
| Permian Corp.   | Casinghead Gas or Dry Gas  | P.O. Box 3119, Midle<br>Address (Give address to which appr           |   |  |
| Nulle of Autorized Transporter of   |  | Address (offe address to which appr                                   | oved copy of this form is to be sent  |  |
|   | Unit Sec. Twp. Pge.  | Is gas actually connected? W  | hen   |  |
| If well produces oil or liquids, so give location of tanks.   | "B" 4 19S 28E  | No  |   |  |
| If this production is commingled  | with that from any other lease or pool,  | give commingling order number:  |   |  |
| COMPLETION DATA   |  |   |   |  |
| Designate Type of Comple  | tion - (X)   | New Well Workover Deepen  | Plug Back Same Res'v. Diff. Res'v   |  |
| Date Spudded  | Date Compl. Ready to Prod.   | Total Depth   |   |  |
| 11-21-66  |  |   | P.B.T.D.  |  |
| Elevation: JF, RKB, RT, GR, etc.  | 12-15-66<br>Name of Producing Formation  | 2785<br>Top Oil/Gas Pay   | Z772<br>Tubing Depth  |  |
| GL 3547 KB 3552   | Grayburg-San Andres  |   | 2736  |  |
| Perforations 2013, 58, 67   | , 73, 86, 92, 2234, 42, 2  | 531, 35, 38, 2659, 2711,  | Depth Casing Shoe   |  |
| 17, 26, 41.   | · · · · · · · · · · · · · · · · · · ·  |   | 2777  |  |
|   | کی کند بردی پر مصبح ہے خصب ہیں انسان ہے جسے ہیے صحب ہے۔ مصبح ہے منصوب یہ انگرندھی جس میں اگنا<br>ا | D CEMENTING RECORD  |   |  |
| HOLE SIZE   | CASING & TUBING SIZE   | 497   | SACKS CEMENT  |  |
| <u>64</u> 11  | (소)  | 2777  | 100   |  |
|   | 2-3/8"   | 2736  |   |  |
|   |  |   |   |  |
| TEST DATA AND REQUEST   | FOR ALLOWABLE (Test must be a  | after recovery of total volume of load oil                            | and must be equal to or exceed top allou  |  |
| OIL WELL  |  | epth or be for full 24 hours)<br>Producing Method (Flow, pump, gas li |   |  |
| Date First New Oil Run To Tanks   | Date of Test   |   | ijt, etc.j  |  |
| 12-15-66  | 1-12-67<br>Tubing Pressure   | Casing Pressure   | Choke Size  |  |
| 24 hrs.   |  |   |   |  |
| Actual Prod. During Test  | Oil-Bbis.  | Water-Bbls.   | Gas - MCF   |  |
| 75 barrels  | 53   | 22  | TSTM  |  |
| ·   |  | )   |   |  |
| GAS WELL  | It much of Man   | 39,22 acres   | tastor 0,715  |  |
| Actual Prod. Test-MCF/D   | Length of Test   | Bbls. Condensate/MMCF   | Gravity of Condensate   |  |
| Testing Method (pitot, back pr.)  | Tubing Pressure (Shut-in)  | Casing Pressure (Shut-in)   | Choke Size  |  |
|   |  | •   |   |  |
| CERTIFICATE OF COMPLIA  | NCE  | OIL CONSERVA  |   |  |
| UNIT ACTUAL OF COME DIA   |  | Inn 96  |   |  |
| I hereby certify that the rules and   | regulations of the Oil Conservation  | APPROVED JAN 60   | 1967, 19  |  |
| Commission have been complied   | with and that the information given he best of my knowledge and belief.                            | BY W. a. Sre  | ssett   |  |
|   |  |   |   |  |
|   |  | TITLE OIL AND GAS INSP  | <u>EGIUH</u>  |  |
| A. 1- 11  |  |   | compliance with RULE 1104.  |  |
| K.W. Jande.   | والمستجد المستجد المستجد والمتحد والمتحد والمتحد والمتحد المتوج عشار متحد أتسكن ستعتب والمحد       | If this is a request for allow  | vable for a newly drilled or deepened<br>nied by a tabulation of the deviation  |  |
| ( , -   | inature) ()  | tests taken on the well in account                                    | dance with RULE 111.  |  |
| Agent   |  | All sections of this form mu  | st be filled out completely for allow-  |  |
| •   | Title)   | able on new and recompleted we  | 5118.   |  |
| 1 0 <u>0</u> 4 <del>0</del>   | (Date)   |   | Fill out only Sections I, II, III, and VI for changes of owner,<br>well name or number, or transporten or other such change of condition. |  |
| 1-22-67   | Date)  |   |   |  |
| A STATE OF | Date)  | Separate Forms C-104 mus  | t be filed for each pool in multiply  |  |
| A STATE OF | Datej  |   |   |  |

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