

DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS
OPERATOR	2
PERFORATION OFFICE	

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

Form 1-114
Supersedes Old Circular C-110
Effective 1-1-67

RECEIVED

OCT 14 1969

O. C. C.
ARTESIAN OFFICE

Petroleum Corporation of Texas		
Address		
P. O. Box 911, Breckenridge, Texas 76024		
Reason(s) for filing (Check proper box)		
New Well	Change in Transporter of:	Other (Please explain)
Recompletion	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>	Effective November 1, 1969
Change in ownership	Consolidated Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	Change from Dry Gas

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
Mohawk Federal	1	Bitter Lake SA, South	State, Federal or Free Federal
Location			
Unit Letter	0	660 Feet From The South Line and 1980 Feet From The East	
Line of Section	22	Township 10S Range 25E, NEPM, Chaves County	

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)		
The Permian Corporation	Box 3119, Midland, Texas 79701		
Name of Authorized Transporter of Consolidated Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
None			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
	0	22	10S
			25E
			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	Play Back	Same Horiz.	Diff. Horiz.
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.S.T.D.					
Perf.	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

(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/MCF	Gravity of Condensate
Testing Method (pilot, 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.

PETROLEUM CORPORATION OF TEXAS

Mary B. Taylor
(Signature)

Production Clerk

(Title)

October 10, 1969

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19

BY W. A. Gressett

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.