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LAND OFFICE	
TRANSPORTER	OIL 1
	GAS
OPERATOR	1
PRORATION OFFICE	

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

JAN 5 1973

Form C-104, Actely for allow-
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator	O. C. C.		
Address	ARTESIA, OFFICE Reading & Bates Oil and Gas Company /		
Reason(s) for filing (Check proper box)	810 N. Dixie Blvd., Room 202, Odessa, Texas 79761		
New Well	Change in Transporter of:	Other (Please explain)	
Recompletion	Oil	Change of Operator Name effective	
Change in Ownership	Casinghead Gas	January 1, 1973 from Reading & Bates, Inc.	
	Dry Gas		
	Condensate		

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE			
Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
White Ranch	1	West White Ranch Devonian	State, Federal or Fee Fee
Location			
Unit Letter	A	660 Feet From The North Line and	660 Feet From The East
Line of Section	1	Township 12S	Range 28E, NMPM, Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approved copy of this form is to be sent)	
The Permian Corporation (Trucks)		P. O. Box 1183, Houston, Texas 77001	
Name of Authorized Transporter of Casinghead Gas	or Dry Gas	Address (Give address to which approved copy of this form is to be sent)	
No connection available			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp. Rge.
	A	1	12S 28E

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well
			Workover
			Deepen
			Plug Back
			Same Res'v.
			Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	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

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 (shut-in)	Casing Pressure (shut-in)	Choke Size

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.

Paul J. Bazzoni
(Signature)
Production Superintendent
(Title)
January 3, 1973
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 14 1973

BY W. A. Gressett
TITLE OIL AND GAS INSPECTOR

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