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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Separate Forms C-104 must be filed for each pool in multiply completed wells.

| FILE / L | | AND | GAS |
|---|--|---|---|
| U.S.G.S. | AUTHORIZATION TO TRAN | NSPORT OIL AND NATURAL | |
| LAND OFFICE | + | | SEP 2 5 1969 |
| TRANSPORTER GAS | | | |
| OPERATOR / | | | O. C. C. ARKESIA, OFFICE |
| PRORATION OFFICE Operator | | | OFFICE |
| Plains Radio Broad | dcasting Company | | |
| Address | | | |
| 305 West 9th Ama Reason(s) for filing (Check proper bo | rillo, Texas 79101 | Other (Please explain) | |
| New Well | Change in Transporter of: | | |
| Recompletion | Oil Dry Gas | 高! | |
| Change in Ownership x operato | r Casinghead Gas Condens | sate | |
| If change of ownership give name | | al Dublishing Common | v 305 West Oth Amoutte |
| and address of previous owner o | perator Avalanche-Journ | iai cupitaning compan | y JUD WEST JUN MINATIHO |
| . DESCRIPTION OF WELL AND | Well No. Pool Name, Including Fo | ermation Kind of Lea | se Lease No. |
| LE Ranch 7-X | 1 Chisum San A | | |
| Location Location | | | |
| Unit Letter C; 3 | 30 Feet From The North Line | e and 2310 Feet From | The West |
| | Danmakin II Caralla Banca 20 | l Treat , NMPM, | Chaves County |
| Line of Section 7 | ownship 11 South Range 28 | Fast , NMPM, | Chaves |
| I. DESIGNATION OF TRANSPO | RTER OF OIL AND NATURAL GAS | S Address (Give address to which appr | oved capy of this form is to he sent) |
| Name of Authorized Transporter of C | or Condensate | Address (Give address to which appr | |
| The Permian Corp | | Address (Give address to which appr | exas Attn': Mr. Fulsom oved copy of this form is to be sent) |
| | | | |
| If well produces oil or liquids, | Unit Sec. Twp. Rge. C 7 11S 28 E | Is gas actually connected? | /hen |
| give location of tanks. | | | |
| If this production is commingled v. COMPLETION DATA | with that from any other lease or pool, | give commingling order number: | |
| Designate Type of Complete | tion - (X) | New Well Workover Deepen | Plug Back Same Res'v. Diff. Res'v. |
| | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| Date Spudded | Date Compt. Heady to Flod. | - · · | |
| Elevations (DF, RKB, RT, GR, etc. | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth |
| | | | Depth Casing Shoe |
| Perforations | | | · |
| | TUBING, CASING, AND | CEMENTING RECORD | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | | | |
| | | | |
| | | | |
| V. TEST DATA AND REQUEST | FOR ALLOWABLE (Test must be a able for this de | fter recovery of total volume of load o pth or be for full 24 hours) | il and must be equal to or exceed to |
| OIL WELL Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas | lift, etc.) |
| | | | Choke Size |
| Length of Test | Tubing Pressure | Casing Pressure | Chore Size |
| Actual Prod. During Test | Oil-Bbls. | Water - Bbls. | Gas-MCF |
| Actual Float Dulling 1481 | | | |
| I | | | |
| GAS WELL | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Actual Prod. Test-MCF/D | Feudin or 1ear | | |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| | | | |
| VI. CERTIFICATE OF COMPLIA | ANCE | | VATION COMMISSION |
| y to angle or analysis at the all a middle of the | nd regulations of the Oil Conservation | APPROVED SEP 3 | , 19 |
| I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given | | BY W. A. Sressett OIL AND GAS INSPESTOR | |
| above is true and complete to the best of my knowledge and belief. | | | |
| Plains Radio Bro | adcasting Company | TITLE | |
| | 2. | This form is to be filed i | n compliance with RULE 1104. |
| (Signature) Leon Swift | | 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 | |
| Field Repr. | | tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow | |
| | (Title) | able on new and recompleted wells. | |
| Septemb | er 23, 1969 | Fill out only Sections I well name or number, or transf | , II, III, and VI for changes of owner porter, or other such change of condition |
| | (Date) | | evad for each most in multipl |