

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

I.

| | |
|------------------|-------|
| DISTRIBUTION | |
| SANTA FE | 1 |
| FILE | 1 |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL / |
| | GAS |
| OPERATOR | / |
| PRORATION OFFICE | |

| | |
|--|--|
| Operator W. H. Brady | |
| Address Rt. 2 Box 153 Roswell, New Mexico 88201 | |
| Reason(s) for filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |
| Other (Please explain) returned to production | |

RECEIVED

SEP - 9 1976

O. C. C.
ARTESIA, OFFICE

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------------|---|---|-----------|
| Lease Name Sturgeon | Well No. 1 | Pool Name, Including Formation Linda San Andres | Kind of Lease State, Federal or Fee Fee | Lease No. |
| Location Unit Letter F 1650 Feet From The W Line and 1650 Feet From The North Line of Section 33 Township 6S Range 26E , NMPM, 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"/> Navajo Crude Purchasing Co. | Address (Give address to which approved copy of this form is to be sent) P. O. Box 175 Artesia, N.M. 88210 | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | |
| If well produces oil or liquids, give location of tanks. | Unit F | Sec. 33 |
| | Twp. 6S | Rge. 26E |
| | Is gas actually connected? No | |
| | When | |

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 <input checked="" type="checkbox"/> | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth 1046 | P.B.T.D. | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3605 Gr | Name of Producing Formation San Andres | Top Oil/Gas Pay 1085 - 1021 | Tubing Depth 1034 | | | | | |
| 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

| | | | |
|---|--------------------------------------|--|------------------------|
| Date First New Oil Run To Tanks Sept. 3, 1976 | Date of Test Sept. 4, 1976 | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 24 hrs. | Tubing Pressure 0 | Casing Pressure 0 | Choke Size 0 |
| Actual Prod. During Test 2.76 bbls. | Oil-Bbls. 1 | Water-Bbls. 1.76 | Gas-MCF TSTM |

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 |

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.

W. H. Brady
(Signature)
Operator

(Title)

Sept. 8, 1976

(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 8 1976, 19

BY W. A. Gressett

TITLE SUPERVISOR, DISTRICT

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 multiple