NO. OF COPIES RECEIVED		5	
DISTRIBUTION			
SANTA FE			
FILE		/-	
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR		2	
PRORATION OFFICE			
Operator			

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110

FILE /-		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TR	RANSPORT OIL AND NATURA	AL GASRECEIVED
LAND OFFICE			REGEIVED
TRANSPORTER OIL /			
GAS			SEP 2 8 1967
OPERATOR 2			021 2 0 1507
I. PROPATION OFFICE Operator			
H. N. S	Weeney		ARTESIA, OFFICE
Address			
Box 158	2 - Roswell, New Mexico 8	88201	
Reason(s) for filing (Check proper)	oox)	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry (	Gas 🔲	
Change in Ownership	Casinghead Gas Cond	ensate	
16 -1 - 6			
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AN			
Lease Name	Well No. Pool Name, Including	1) 42 12	Lease No.
O'Brien 'B"	l Updes. Twin La	kes-S. A. State, Fe	deral or Fee
Location			
Unit Letter;;	Feet From The North L	ine and 1980 Feet Fr	om The <b>East</b>
2			
Line of Section 2	Township <b>98</b> Range	28E , NMPM,	Chaves County
I DESIGNATION OF TRANSPO	DTED OF OU AND NATURAL O	4.0	
Name of Authorized Transporter of	RTER OF OIL AND NATURAL G		oproved copy of this form is to be sent)
Scurlock 011 Company			
Name of Authorized Transporter of	Casinghead Gas or Dry Gas	Address (Give address to which ar	oproved copy of this form is to be sent)
			provide copy of this form is to be senty
The world and word and an idea	Unit Sec. Twp. Rge.	Is gas actually connected?	When
If well produces oil or liquids, give location of tanks.	A 2 98 28E		········
To Alice and describe the second selection.		No	
COMPLETION DATA	with that from any other lease or pool	, give commingling order number: -	
	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.
Designate Type of Comple	$\mathbf{x}$	•	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
9-1-67	9-26-67	2615	
Elevations (DF, RKB, RT, GR, etc.	, Name of Producing Formation	Top Oil/Gas Pay	Z612 Tubing Depth
3946' GR	San Andres	2504	
Perforations	Van Andres	2584	2580 Depth Casing Shoe
2584	-2598 San Andres		2615!
		D CEMENTING RECORD	2013
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/813	327	150 sacks
7-7/8"	4-1/2**	2615	150 sacks
			190 Sacks
. 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 allow-
OIL WELL	able for this d	epth or be for full 24 hours)	y) in the
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	s lift, etc.)
9-26-67	9-26-67	Swabbing Casing Pressure	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
15 hours			
Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas - MCF
60 BO + 15 6 W	60	15	TSTM
GAG WIDT T			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	151. 6	
Actual Ploa. 1661-MCF/D	Length of lest	Bbls. Condensate/MMCF	Gravity of Condensate
Total Make & Calena hash as h	This Park I have been a second of the second		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
. CERTIFICATE OF COMPLIA	NCE	OIL CONSER	VATION COMMISSION
	regulations of the Oil Conservation		, 19
	with and that the information given he best of my knowledge and belief.		ressett
•	-		
· · · · · · · · · · · · · · · · · · ·		TITLE	no figure
1/2/1		This form is to be filed i	in compliance with RULE 1104.
/V. //. Au	renery	If this is a request for al	lowable for a newly drilled or deepened
(Sig	nature)	well, this form must be accome tests taken on the well in ac	panied by a tabulation of the deviation
Operator		11	
(7	(Title)  All sections of this form must be filled out cor able on new and recompleted wells.		wells.
Sentember 26 1967 Fill out only Sections I. II. III. and VI		II. III. and VI for changes of owner,	
	Date)	well name or number, or transp	orter, or other such change of condition.
		Separate Forms C-104 m completed wells.	ust be filed for each pool in multiply

## INCLINATION REPORT

RECEIVED

H. N. SWEENY
P. O. Box 1582
Roswell, New Mexico

SEP 28 1967

Programme and the second

ARTESIA, COVICE

O'Brien 'B' #1 Zinit letter B- 660/N' 1980/E -2-95-28E

Chaves County, New Mexico

## RECORD OF INCLINATION

Depth (feet)	Angle of Inclination (degrees)	Displacement (feet)	Accumulative Displacement (feet)	
Depin (reer)				
325	3/4	4.26	4.26	
800	3/4	6.22	10.48	
1,265	1	8.13	18.61	
1,743	1/2	4.16	<b>22.77</b>	
	3/4	4.92	27.69	
2,119	3/4	3.35	31.04	
2,375	3/4	2.03	33.07	
2,530 2,615	3/4	1.11	34.18	

I hereby certify that I have personal knowledge of the data and facts placed on this report, and that such information given above is true and complete.

VERNA DRILLING COMPANY

P. O. Box 1000 Levelland, Texas

Sworn and Subscribed before me, this the 13th day of September, 1967.

Notary Public in and for Hockley

County, Texas