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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

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O. C. C.

APPROVAL OFFICE

Operator SHEWAN-DOAN OIL CORPORATION		OIL CONSERVATION COMMISSION	
Address 702 V-J Tower Bldg., Midland, Texas 79701			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	This was a re-entry & sidetrack of junked hole. Pulled 4318'-4 1/2" csg., spotted cmt. to 2715' & sidetracked junk.	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of ownership give name and address of previous owner			

I. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico "L" State	Lease No. 6m	Well No. 1	Pool Name, Including Formation Haystack-Cisco Gas	Kind of Lease State, Federal or Fee State
Location				
Unit Letter K , 1980 Feet From The West Line and 1980 Feet From The South				
Line of Section 16 Township 6-S Range 27-E , NMPM, Chaves County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
The Permian Corporation	Box 1183-Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Transwestern Pipeline Co. (H. Nat. Aicklen)	Box 2521-Houston, Texas 77001					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	K	16	6-S	27-E	NO yes	1-28-72 estimate 12-26-71

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 8-19-71	Date Compl. Ready to Prod. 10-28-71		Total Depth 6020			P.B.T.D. 5950		
Elevations (DF, RKB, RT, GR, etc.) 4097 LF, 4086 GL	Name of Producing Formation Cisco		Top Oil/Gas Pay 5890			Tubing Depth 582'		
Perforations 5890-5902 w/2 JSFF						Depth Casing Shoe 6019		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
17 1/2"	13-3/8"		35			3 yds. readymix		
11"	8-5/8"		1415			850 SXS		
7-7/8"	4 1/2"		6019			300 SXS		
	2-3/8"		5825			4 1/2" csg. Pkr.		

V. 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 341	Length of Test 8 hrs.	Bbls. Condensate/MMCF -0-	Gravity of Condensate -
Testing Method (pitot, back pr.) One Point	Tubing Pressure 60 psig	Casing Pressure Pkr.	Choke Size 20/64"

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.

Billy Gover
(Signature)
Billy Gover
Dist. Superintendent
(Title)
December 23, 1971
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY **W. A. Everett**
OIL AND GAS INSPECTOR
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 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 completed wells.