

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

MAY 14 1982

O. C. D.

ARTESIA, OFFICE

I.

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

Operator Enserch Exploration, Inc. ✓		ARTESIA, OFFICE	
Address P. O. Box 4815, Midland, Texas 79704			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:		
Recompletion <input 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name J. G. O'Brien	Well No. 4	Pool Name, including Formation Undesignated Penn.	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter <u>L</u> ; <u>2130</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>31</u> Township <u>7S</u> Range <u>29E</u> , NMPM, <u>Chaves</u> County				

III. 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)					
Phillips Petroleum Company - Trucks	4001 Penbrook, Odessa, Texas 79763					
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)					
MAPCO Production Company	705 S. Elgin, Tulsa, Oklahoma 74120					
If well produces oil or liquids, give location of tanks.	Unit <u>L</u>	Sec. <u>31</u>	Twp. <u>7S</u>	Rge. <u>29E</u>	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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 1/27/82	Date Compl. Ready to Prod. 5/4/82		Total Depth 6950'		P.B.T.D. 6815'			
Elevations (DF, RKB, RT, GR, etc.) 4047.9' GR	Name of Producing Formation Pennsylvanian		Top Oil/Gas Pay 6761'		Tubing Depth 6644'			
Perforations 6761'-68'					Depth Casing Shoe 6949'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		350'		240 sx. Circ.			
12-1/4"	9-5/8"		2785'		1170 sx. Circ.			
8-3/4"	5-1/2"		6949'		675 sx.			
	2-3/8"		6644'					

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 220	Length of Test 24 Hours	Bbls. Condensate/MMCF Trace	Gravity of Condensate 58.9
Testing Method (pitot, back pr.) Pitot	Tubing Pressure (Shut-in) 1720#	Casing Pressure (Shut-in) 1720#	Choke Size 12/64"

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.

H. F. Burnett
(Signature) H. F. Burnett
Production Superintendent
(Title)
May 12, 1982
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY _____

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.