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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND RECEIVED BY
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
AUG 23 1984
O. C. D.
ARTESIA OFFICE

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-85

I. Operator
N. Dale Nichols
Address
P. O. Box 1972, Midland, Texas 79702
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
CASINGHEAD GAS MUST NOT BE
FLARED AFTER 10-30-84
UNLESS AN EXCEPTION TO;
RULE 306 IS OBTAINED
If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Alma Shields	Well No. 4	Pool Name, including Formation Acme (San Andres)	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location Unit Letter K : 1650 Feet From The South Line and 1650 Feet From The West Line of Section 33 Township 7 S Range 27 E , NMPM, Chaves County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent.) P. O. Box 1183, Houston, Texas 77001					
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 M	Sec. 33	Twp. 7 S	Rge. 27 E	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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same as last	1111	Restv.
Date Spudded 4-11-84	Date Compl. Ready to Prod. 6-29-84	Total Depth 2118	P.B.T.D. 2029						
Elevations (DF, RKB, RT, GR, etc.) 4005 GL	Name of Producing Formation San Andres	Top of Gas Pay 1925	Tubing Depth 1941						
Perforations 1 hole 1930, 1 hole 1943, 1 hole 1949, 2 holes 1957	Depth Casing Shoe 2118								
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE 9 7/8	CASING & TUBING SIZE 7"	DEPTH SET 278	SACKS CEMENT 100						
6 1/4	4 1/2	2118	200						
	2 3/8	1927 1941							

Post ID-2
8-31-84
Gump + BM

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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 6-29-84	Date of Test 7-12-84	Producing Method (Flow, pump, gas lift, etc.) Pumping - Rod pump 1 1/2" x 2" x 8'	
Length of Test 24hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 8.28	Water - Bbls. 1.38	Gas - MCF 11

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.

N. Dale Nichols
(Signature)
Operator
(Title)
August 22, 1984
(Date)

OIL CONSERVATION COMMISSION

AUG 31 1984

APPROVED _____, 19____
BY _____
Original Signed By
Leslie A. Clements
Supervisor District II

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.