NO. OF COPIES RECEIVED		5	
DISTRIBUTION			Ī
SANTA FE		1	
FILE		1	
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	1	
OPERATOR		1	
PRORATION OFFICE			
Operator		•	

October 30, 1978

(Date)

DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSION	Form C-104		
SANTA FE /	REQUEST	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-			
FILE /		AND Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	_ GAS		
LAND OFFICE					
TRANSPORTER OIL /			RECEIVED		
GAS /					
OPERATOR /			MOV 4 40m		
I. PRORATION OFFICE Operator			NOV - 1 1978		
W. A. Moncrief, Jr. a			0. C. C.		
	inth at Commorae Fort Hor	th Towns 76102	ARTESIA, OFFICE		
Reason(s) for filing (Check proper b	nth at Commerce, Fort Wor	Other (Please explain)	•		
New We!l	Change in Transporter of:		,		
Recompletion	Oil Dry Go	ıs			
Change in Ownership	Casinghead Gas Conde	nsate 🔲			
	5-1-79				
If change of ownership give name and address of previous owner	2.5987				
and address of previous owner	F-34 Car	nyor. monou			
II. DESCRIPTION OF WELL AND	DLEASE Balludgette				
Lease Name	Well No. Pool Name, Including F	Formation Kind of Le	Lease No.		
Baldridge Canyon "Com	n" <u>l Wildcat - N</u>	Morrow State, Fed	eral or Fee State LG 5174		
Location					
Unit Letter G; 2	2310 Feet From The north Lin	ne and 1980 Feet Fro	om The <u>east</u>		
					
Line of Section 13	Township 24S Range 2	24E , NMPM, I	Eddy County		
Name of Authorized Transporter of C	RTER OF OIL AND NATURAL GA		proved copy of this form is to be sent)		
			,		
The Permian Corporati	On Casinghead Gas Or Dry Gas X	Box 1183, Houston,	proved copy of this form is to be sent)		
El Paso Natural Gas (
El laso Naculal Gas C	Unit Sec. Twp. Ege.	Box 1492, E1 Paso, Is gas actually connected?	When		
If well produces oil or liquids, give location of tanks.	G 13 24S 24E		1-3-79		
		No yes			
	with that from any other lease or pool,	give commingling order number:			
V. COMPLETION DATA		New Well Workover Deepen	Plug Back Same Resty. Diff. Resty		
Designate Type of Complete	tion $-(X)$	X			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
7-28-78	9-13-78	11,258	11,109 by tie-in log		
Elevations (DF, RKB, RT, GR, etc.	, Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
4428' GD 4447' KB	Morrow	10,788'	10,658'		
Perforations			Depth Casing Shoe		
10,789-10,807			11,210'		
	TUBING, CASING, AN	D CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
17½"	13-3/8"	972.03'	800		
12表"	8-5/8"	3381'	1550		
7-7/8"	4½"	11,210'	325		
	2-3/8"	10,658'	i		
V. TEST DATA AND REQUEST			oil and must be equal to or exceed top allow-		
OIL WELL Date First New Oil Run To Tanks	Date of Test	epth or be for full 24 hours) Producing Method (Flow, pump, gas	lift etc.)		
Date t list New Oil Yaw to Iduka	Date of 1est	Producting Method (1 tow) Pampi and	and the first		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Length of Tost					
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF		
\ <u></u>		<u></u>			
GAS WELL					
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
9-13-78 AOF 4357	24 hrs	nil			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
Back pressure	3332	packer	1/8; 3/16; 7/32 & 눟''		
I. CERTIFICATE OF COMPLIA	NCE	OIL CONSER	VATION COMMISSION		
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.		JAN 1 6 1979			
		APPROVED, 19			
		or W. a. Dresset			
above is time and complete to t	Door or my knowledge and belief		DE DISTRICT II		
		TITLE BUPERVISOR, DISTRICT II			
			This form is to be filed in compliance with RULE 1104.		
Deney E. Thorn	van	If this is a request for al	If this is a request for allowable for a newly drilled or deepened		
(Si,	gnature)	well, this form must be accome tests taken on the well in ac	panied by a tabulation of the deviation		
Exploration Manag	ger		must be filled out completely for allow-		
	Title)	able on new and recompleted	wells.		

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.