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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PERMITS 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-1
Effective 1-1-65

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DEC 10 1980

O. C. D.

ARTESIA, OFFICE

C & K Petroleum, Inc.

Address
P.O. Drawer 3546, Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well ☐ *Designate*
Recompletion ☐ *Change in Transporter of:*
Change in Ownership ☐ Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☒

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name CK Federal	Well No. 2-Z	Pool Name, Including Formation Wildcat	Kind of Lease State, Federal or Fee Federal	Lease No. 15295
Location Unit Letter J : 1650 Feet From The South Line and 1748 Feet From The East Line of Section 8 Township 24-S Range 26-E, NMPM, Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ P&O Falco, Inc., Attn: Wayne Metcalf	Address (Give address to which approved copy of this form is to be sent) P.O. Box 108, Shreveport, La. 71161					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Texas 79999					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 8	Twp. 24-S	Rge. 26-E	Is gas actually connected? Yes	When July 11, 1980

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Prod.	Diff. Prod.
		X						
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.D.T.D.		
Elevations (DF, RKE, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Testing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	Length of Test	Lbbs. Condensate/MMCF	Gravity of Condensate
Testing Method (flow, back pr.)	Tubing Pressure (lbwt-in)	Casing Pressure (lbwt-in)	Choke Size

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.

[Signature]
(Signature)

Administrative Supervisor

(Title)

December 9, 1980

(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 11 1980, 19

BY *[Signature]*

TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or dry gas well, this form must be accompanied by a tabulation of true depth 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 recompleting wells.

Fill out only Sections I, II, III, and VI for change of ownership, name of owner, or transporter, or other such change of condition.