

OIL CONSERVATION DIVISION

P. O. BOX 20000

SANTA FE, NEW MEXICO 87501

Form C-104
RECEIVED 10-1-79

JUL 05 1983

O. C. D.
ARTESIA, OFFICEREQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Worth Petroleum Company

Box 17406, Fort Worth, Texas 76102

() for filing (Check proper box)

☒ Well
☐ Production
☐ Change in Ownership

Change in Transporter of:

☐ Oil ☐ Dry Gas
☐ Casinghead Gas ☐ Condensate

Other (Please explain)

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 8/12/83
UNLESS AN EXCEPTION FROM BLM
IS OBTAINEDRange of ownership give name
Address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Amoco-Federal	1	Undeveloped Brushy Draw Cherry Canyon	State, Federal or Fee Federal	
Section	Well Letter	Feet From The	Line and	Feet From The
27	I	330	East	1665
Range	Township	Range	County	
29	26 south	29 east	Eddy	

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
The Permian Corporation	Permian Bldg., Midland, TX 79701
Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)

Well produces oil or liquids, or both in tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	I	27	26S	29E	no	

If 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 Res'v.	Diff. Res'v.
	X		X					
Completed	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
4/13/83	6/22/83	6150'	5810 5580					
Well (LF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
GR:2869, KB:2877	Cherry Canyon	4984 4910	5000'					
Locations	Depth Casing Shoe							
4984-90; 5000-04 2spf								

TUBING, CASING, AND CEMENTING RECORD

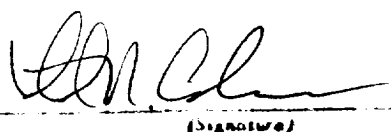
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8-5/8" 24#	450	280 sx Class "C"
7-7/8"	4-1/2" 11.6#	5810'	450 sx Class "C"
	2 3/8	5000	

TEST DATA AND REQUEST FOR ALLOWABLE (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)

First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
6/23/83	6/25/83	pump	
Time of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs			
Pressure During Test	Oil-Bble.	Water-Bble.	Gas-MCF
61	61	150	25 mcf

Well	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Test-MCF/D			
Method (prior, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

DECLARATION OF COMPLIANCE

I certify that the rules and regulations of the Oil Conservation
have been complied with and that the information given
is true and complete to the best of my knowledge and belief.

President, Michael R. Gleason

(Title)

June 27 1983

OIL CONSERVATION DIVISION

JUL 12 1983

APPROVED _____, 19

Original Signed By
BY _____
Supervisor District II

This form is to be filed in compliance with RULE 1004.

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 to accordance with RULE 1004.All portions of this form must be filled out completely for allow-
able on new and recompleting wells.