NEW MEXICO
MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

RECEIVED
JUL 05 1983
O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Worth Petroleum Company

Box 17406, Fort Worth, Texas 76102

Reason(s) for filing (Check proper box)
- New Well [X]
- Recompletion [ ]
- 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 OBTAINED

If change of ownership give name and 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	~~Undesig.~~ Brushy Draw Delaware Cherry ~~Canyon~~	State, Federal or Fee Federal	

Unit Letter I ; 330 Feet From The East Line and 1665 Feet From The South

Line of Section 27 Township 26 south Range 29 east , NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of 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
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [ ]	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	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					

Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
4/13/83	6/22/83	6150'	~~5810~~ 5580
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
GR:2869, KB:2877	Cherry Canyon	~~4910~~ 4984	5000'
Perforations			**Depth Casing Shoe**
4984-90; 5000-04 2spf			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12¼"	8-5/8" 24#	450	280 sx Class "C"
7-7/8"	4-1/2" 11.6#	5810'	450 sx Class "C"
	2⅜	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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
6/23/83	6/25/83	pump	Post ID-2 7-15-83 + BK
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24 hrs			Comp
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**
61	61	150	25 mcf

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**

CERTIFICATE OF COMPLIANCE

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

(Signature)

President, Michael R. Gleason
(Title)

June 27 1983
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 12 1983, 19

BY Original Signed By
Leslie A. Clements

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 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, transporter, or other such change of condition.