

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

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

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**I. Operator**  
Cities Service Oil & Gas Corp.

**Address**  
P.O. Box 1919 - Midland, Texas 79702

**Reason(s) for filing (Check proper box)**

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership			

**Other (Please explain)**  
Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)

If change of ownership give name and address of previous owner \_\_\_\_\_  
THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name Wyatt A-Federal	Well No. 9	Pool Name, including Formation Maljamar (G-SA) R. 8561	Kind of Lease State, Federal or Fee Fed.	Lease No. LC 062391
Location Unit Letter <u>P</u> : <u>500</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>East</u> Line of Section <u>34</u> Township <u>17S</u> Range <u>33E</u> , NMPM, Lea County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas-New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528 - Hobbs, New Mexico 88240
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	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
	0 34 17S 33E No

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

NOTE: Complete Parts IV and V on reverse side if necessary.

**VI. 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 is true and complete to the best of my knowledge and belief.

F. A. Williams  
(Signature)  
District Operations Manager - Production  
(Title)  
September 25, 1987  
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 29 1987, 19\_\_\_\_\_  
BY ORIGINAL SIGNED BY JERRY SEXTON  
TITLE DISTRICT I SUPERVISOR

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

ZA Corbin abo 9/29/87 E

#### IV. 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	X		X		
Date Spudded - Respudded	Date Compl. Ready to Prod.	Total Depth				P.B.T.D.			
8-24-87	9-24-87	8925'				4805'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay				Tubing Depth			
4131'GR	Upper Grayburg	4652'				4633'			
Perforations 2 SPF @ 4652, 53, 54, 55, 56, 57, 58, 59, 4706, 07, 08, 09, 10, 11 and 4712'. Total of 30 holes (0.40" dia & 13"pen in Berea SS)						Depth Casing Shoe			
						8925'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"		13-3/8"		297'		375 sacks (Circulated)			
12-1/4"		8-5/8"		3149'		675 sacks (TOC @ 1000)			
8-7/8"		5-1/2"		8925'		450 sacks (TOC @ 2700)			

#### V. 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)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
9-13-87	9-24-87	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.			
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	56	287	39

#### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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 SEP 28 1987  
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