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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION 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-110
Effective 1-1-65

I. Operator
Amerada Petroleum Corporation
Address
P. O. Box 668 - Hobbs, New Mexico 88240
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☒ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
**To Request Temporary
Commingling Approval.**

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State BT"C"	Well No. 5	Pool Name, including Formation Bagley Pennsylvanian	Kind of Lease State, Federal or Fee State	Lease No. E-1347
Location Unit Letter F , 1980 Feet From The South Line and 1980 Feet From The West Line of Section 35 Township 11-S Range 33-E , 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"/> Service Pipe Line Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 337 - Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1984 - Jal, New Mexico 88252			
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 35	Twp. 11-S	Rge. 33-E
	Is gas actually connected? Yes			When 4-22-68

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

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	
Date Spudded 9-10-52	Date Compl. Ready to Prod. 11-4-52	Total Depth 9417'	P.B.T.D. 9033'					
Elevations (DF, R&B, RT, GR, etc.) 4250' DF	Name of Producing Formation Bagley Pennsylvanian	Top Oil/Gas Pay 8910'	Tubing Depth 9270'					
Perforations 8917-24, 8953-70', 8974-81', 8984-90', 8994-99', 9004-08', 9014-18', 9021-25'	Oil Zone Just			Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET			SACKS CEMENT			
17-1/2"	13-3/8"	298'			225			
11"	8-5/8"	3768'			1500			
7-7/8"	5-1/2"	9417'			600			

V. 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 1,044	Length of Test 21 Hrs.	Bbls. Condensate/MMCF 66	Gravity of Condensate 61.2
Testing Method (pitot, back pr.) Back Press.	Tubing Pressure (shut-in) 1700#	Casing Pressure (shut-in)	Choke Size 14/64"

VI. 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.

So Tebb
(Signature)
District Superintendent
(Title)
4-26-68
(Date)

OIL CONSERVATION COMMISSION
APPROVED **19**
BY **Joe Stacey**
TITLE
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.