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TRANSPORTER	OIL	
	GAS	
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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
APR 19 1967

I.

Operator Stoltz & Company - Clark	
Address c/o Oil Reports & Gas Services, Box 763, Hobbs, New Mexico	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sohio State	Well No. 1	Pool Name, including Formation North Bagley-Lower Pennsylvanian Unders. N. Bagley Lower Penn	Kind of Lease State, Federal or Fee State	Lease No. K-2371
Location				
Unit Letter P	660	Feet From The South	Line and 660	Feet From The South East
Line of Section 4	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"/> Pan American Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1725, Midland, Texas	
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 P	Sec. 4
	Twp. 11S	Rge. 33E
	Is gas actually connected? No	When

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 3/1/67	Date Compl. Ready to Prod. 4/15/67		Total Depth 10,450		P.B.T.D. 10,350			
Elevations (DF, RKB, RT, GR, etc.) 4261 GR	Name of Producing Formation Lower Penn		Top Oil/Gas Pay 10,174		Tubing Depth 10,132			
Perforations 10,174-76, 10,218-20, 10,231-33, 10,272-74					Depth Casing Shoe 10,450			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
16	13 3/8		375		400			
10 3/4	8 5/8		3750		200			
7 7/8	4 1/2		10,450		550			
	2 3/8		10,132					

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 4/15/67	Date of Test 4/15-16/67	Producing Method (Flow, pump, gas lift, etc.) Kobe Pump	
Length of Test 24 hrs	Tubing Pressure --	Casing Pressure --	Choke Size --
Actual Prod. During Test 377	Oil-Bbls. 264	Water-Bbls. 113	Gas-MCF 333

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

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.

A. L. Smith
(Signature)

Agent
(Title)

April 18, 1967
(Date)

OIL CONSERVATION COMMISSION

APPROVED *1967*, 19

BY

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.

