

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
HOURS OF USE AND C.  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
AUG 3 11 43 AM '67

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator <b>TEXAS PACIFIC OIL COMPANY</b>	
Address <b>P. O. Box 1069 - Hobbs, New Mexico</b>	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	<b>Also request temporary commingling of Bagley Lower Penn with Upper Penn.</b>
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	
Casinghead Gas <input type="checkbox"/>	
Dry Gas <input type="checkbox"/>	
Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Lease Name <b>J. P. Collier</b>	Lease No. <b>NM 315</b>	Well No. <b>4Y</b>	Pool Name, Including Formation <b>North Bagley Lower Penn</b>	Kind of Lease State, Federal or Fee <b>State</b>
Location				
Unit Letter <b>G</b>	<b>1980</b>	Feet From The <b>North</b>	Line and <b>2005</b>	Feet From The <b>East</b>
Line of Section <b>10</b>	Township <b>11-S</b>	Range <b>33-E</b>	, NMPM, <b>Lea</b> County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<b>Service Pipeline Company</b>	<b>3411 Knoxville Ave. - Lubbock, Texas</b>					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<b>Warren Petroleum Corp.</b>	<b>725 Gulf Bldg. - Midland, Texas</b>					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	<b>F</b>	<b>10</b>	<b>11</b>	<b>33</b>	<b>No</b>	<b>Upon Approval</b>

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded <b>5-31-67</b>	Date Compl. Ready to Prod. <b>7-24-67</b>		Total Depth <b>10,200'</b>		P.B.T.D. <b>10,164'</b>			
Elevations (DF, RKB, RT, GR, etc.) <b>4257.7' GR</b>	Name of Producing Formation <b>Lower Penn</b>		Top Oil/Gas Pay <b>10,030'</b>		Tubing Depth <b>10,020'</b>			
Perforations <b>(10,030-34-68-73-99-135')</b>		<b>oh JWR</b>		Depth Casing Shoe <b>10,020'</b>				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<b>17-1/2"</b>	<b>13-3/8"</b>	<b>363'</b>	<b>450</b>
<b>12-1/4"</b>	<b>9-5/8"</b>	<b>3823'</b>	<b>700</b>
<b>8-3/4"</b>	<b>5-1/2"</b>	<b>10,200'</b>	<b>735</b>
	<b>2-3/8"</b>	<b>10,020'</b>	

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 <b>7-24-67</b>	Date of Test <b>7-31-67</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Flowing</b>	
Length of Test <b>24 hrs.</b>	Tubing Pressure <b>357#</b>	Casing Pressure <b>1400#</b>	Choke Size <b>26/64"</b>
Actual Prod. During Test <b>450</b>	Oil - Bbls. <b>85</b>	Water - Bbls. <b>365</b>	Gas - MCF <b>426</b>

GAS WELL

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

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.

Original Signed by  
**Sheldon Ward**

(Signature)  
**Area Superintendent**

(Title)  
**8-2-67**  
(Date)

Deviations & Logs attached

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 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.

DEVIATION RECORD

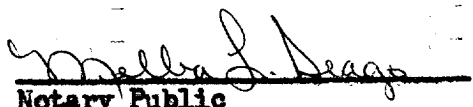
<u>Footage</u>	<u>Slope</u>	<u>Footage</u>	<u>Slope</u>
165	1/2	5,345	1/2
517	3/4	5,650	3/4
990	3/4	6,109	1
1,395	1/4	6,748	1/2
1,695	1/2	7,230	1/4
2,050	1/4	8,279	1
2,310	1-1/4	8,380	1/4
2,846	1-1/4	8,540	3/4
3,310	1-1/4	8,800	3/4
4,220	1/4	9,380	1
4,770	3/4	10,200	1

I hereby certify the information given above is true and complete to the best of my knowledge.

TEXAS PACIFIC OIL COMPANY

  
Sheldon Ward  
Area Superintendent

Subscribed and sworn to before me this 2<sup>nd</sup> day of August 1967.

  
Notary Public  
Lea County, New Mexico

My commission expires January 30, 1971.