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OPERATOR		<u> </u>	
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NEW MEXICO OIL CONSERVATION COMMISSION Form C -104 Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Southern Minerals Corporation Address Corpus Christi, Texas P. O. Box 716, Other (Please explain) Reason(s) for filing (Check proper box) Change in Transporter of: X New Wel Dry Gas Recompletion Casinghead Gas Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Lease No. Vell No. Pool Name, Including Formation Kind of Lease State, Federal or Fee State K5353 State "D" 2 Inbe Pen Location __Line and _ _ **510** 660 Horth Feet From The Unit Letter Lea 34-E 11-S Range Township Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name o: Authorized Transporter of Cil 🔼 Midland, Texas Box 1725 Pan America Petroleum Corporation Address (Give address to which approved copy of this form is to be sent) Name o: Authorized Transporter of Casinghead Gas 💥 or Dry Gas Tulsa, Oklahoma P. O. Box 1589 Warren Petroleum Corporation Is gas actually connected? When P.ge. Unit If well produces oil or liquids, August 17, 1967 Yes 8 11-S | 34-E E give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Same Res'v. Diff. Res'v. New Well Deepen Plug Back Workover Oil Well Gas Well Designate Type of Completion -(X)X P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spudded 9870 August 16, 1967 July 12, 1967 Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) 9562 9856**'** Bough C 4:195.6 Gr. Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 400 ax reg w/25 ca cl 13 3/3", 48# 300 ax neat & 150 ax neat 3,980' 8 **5/**8" plus 2% ca cl (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) 5·동"· 17# V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Flow August 17, August 16, 1967 Choke Size Casing Pressure Length of Cest Tubing Pressure 24/64 Sealed 350# 24 Hours Gas - MCF Water - Bbls. Oil - Bbls. Actual Prod. During Test 76.8 <u> 763.8</u> 401.5 401.5(**0**),763.8(**6**) 76.8(W) **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Actua Pred. Test-MCF/D Length of Test Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) OH CONSERVATION COMMISSION 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.

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1 Tolor	J. R. Irwin
(Signature)	
	Supervisor
(Title)	
	August 18, 1967
(Date)	

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APPROVED.		, 19
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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.