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| SANTA FE | | |
| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |
| Operator | | |

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104 Supersedes Old C-104 and C-110

| FILE | | AND | Effective 1-1-65 |
|--|--|---|--|
| U.S.G.S. | AUTHORIZATION TO T | RANSPORT OIL AND NATURAL | CAS |
| LAND OFFICE | AGTHORIZATION TO T | MANO ON TOTAL AND MATORAL | |
| TRANSPORTER OIL | | · · · · · · · · · · · · · · · · · · · | |
| GAS | | | |
| OPERATOR | | | |
| PRORATION OFFICE | | | |
| H. C. HOOD | | | |
| Address | ox 291, Midland, Texas 79 | 3701 | |
| Reason(s) for filing (Check proper b | • | Other (Please explain) | |
| New Well | Change in Transporter of: | Office (Freuse explain) | |
| Recompletion | Oil Dry | Gas | |
| Change in Ownership | Casinghead Gas 🔲 Con | ndensate | |
| If change of automakin rive name | | | |
| If change of ownership give name and address of previous owner | | | |
| . DESCRIPTION OF WELL AN | D LEASE | | |
| Lease Name | Well No Pool Name, Including | g Formation Kind of Le | State K-4280 |
| Warren State 27 | 1 North Bagley | State, Fed | eral or Fee |
| Location | 000 0 0 | P4.0 | 1.T |
| Unit Letter ; | 980 Feet From The South | Line and 510 Feet Fro | m The West |
| Line of Section 27 | Township 11-S' Range | 33-E: , NMPM, LA | County |
| | | | |
| Name of Authorized Transporter of | RTER OF OIL AND NATURAL or Condensate | | proved copy of this form is to be sen!) |
| Service Pipe Line Co | | | Lubbock, Texas 79413 |
| Name of Authorized Transporter of | | | proved copy of this form is to be sent) |
| Warren Petroleum Cor | poration | Box 1589, Tulsa, Okla | nhoma 74102 |
| If well produces oil or liquids, | Unit Sec. Twp. Rge. | | When |
| give location of tanks. | A 28 11-S 33- | -E No | Unknown |
| | with that from any other lease or po- | ol, give commingling order number: | |
| COMPLETION DATA | Cil Well Gas Well | New Well Workover Deepen | Plug Back Same Resty. Diff Resty |
| Designate Type of Comple | | X | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| October 11, 1967 | December 15, 1967 | 10,062 | 9797 |
| Elevations (DF, RKB, RT, GR, etc. | | Top Oil/Gas Pay | Tubing Depth |
| 4259° DF | Penn (Dallas Zone) | 9392 | 9430 Depth Casing Shoe |
| Perforations 9420 & 9424' 2 | shots per ft. 12 gul | | 9720 |
| 70103 | | AND CEMENTING RECORD | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 17 1/2 | 12 3/4 | 350 | 350 |
| 11 72 | 8 5/8 | 3765 | 350 350 |
| 7 7/8 | 5 1/2 | 10962 | 485 |
| 2" FIE | 2" FIE | 9430 | |
| 7. TEST DATA AND REQUEST | FOR ALLOWABLE (Test must b | e after recovery of total volume of load of | oil and must be equal to or exceed top allow |
| OIL WELL Date First New Oil Run To Tanks | Date of Test | e depth or be for full 24 hours) Producing Method (Flow, pump, gas | lift. etc.) |
| 12/15/67 | 12/18/67 | F1ov | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| 24 hours | 325 | Pkr | 28/64th |
| Actual Prod. During Test | Oil-Bbls. 247 | Water - Bbls. 220 | Gas-MCF 296,000 |
| 247 (Oi1) | 247 | 220 | 230,000 |
| CACAUDIT | | | |
| 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 |
| | | | |
| I. CERTIFICATE OF COMPLIA | NCE | OIL CONSER | VATION COMMISSION |
| | | 4000000 | |
| 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. | | on | |
| | | ef. BY | |
| | / / | TITLE | |
| 111 | // ^ / | 1115 | |

(Title)

1967

December 19,

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.