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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

CORRECTED REPORT

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FEB 23 AM '68

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

Operator Sam Boren	
Address Box 953, Midland, Texas	
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 Graham-State	Well No. 1	Pool Name, Including Formation North Bagley Lower Penn	Kind of Lease State, Federal or Fee	State
Location				
Unit Letter K	1980	Feet From The South	Line and 1980	Feet From The West
Line of Section 8	Township 11S	Range 33E	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 Pet. Corp. (Tks)	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 checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, Oklahoma 74100					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 8	Twp. 11S	Rge. 33E	Is gas actually connected? no	When near future

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 12/28/67	Date Compl. Ready to Prod. 2/24/68	Total Depth 10400	P.B.T.D.					
Pool No. Bagley Lower Penn	Name of Producing Formation Lower Penn	Top Oil/Gas Pay 10124	Tubing Depth 10150					
Perforations 10124 - 10127; 10310 - 10318			Depth Casing Shoe 10399					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2	11 3/4	425	400					
9 7/8	8 5/8	3969	450					
7 7/8	4 1/2	10398	450					

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 2/25/68	Date of Test 2/25/68 - 2/26/68	Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 638	Oil-Bbls. 225	Water-Bbls. 413	Gas-MCF 110

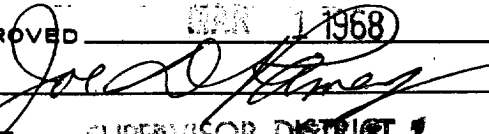
GAS WELL

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

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.

	
Agent	(Signature)
2/28/68	(Title)
	(Date)

OIL CONSERVATION COMMISSION	
APPROVED	FEB 1 1968
BY	
TITLE	SUPERVISOR DISTRICT 1
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 Sections I, II, III, and VI only 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.	

