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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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

I. Operator **Stolts & Company - Clark**

Address **c/o Oil Reports & Gas Services, Box 763, Hobbs, New Mexico**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☐ Oil ☐ Condensate ☐

Change in Ownership ☐ Casinghead Gas ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE **North Bagley - Upper Pennsylvanian**

Lease Name Frances	Well No. 1	Pool Name, including Formation Under North Bagley	Kind of Lease R-3411	Lease No. K-3905
Location Unit Letter C ; 660 Feet From The North Line and 1980 Feet From The West		State, Federal or Fee State		
Line of Section 29 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"/> Admiral Crude Oil Corp	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1713, 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 C	Sec. 29
	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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			<input checked="" type="checkbox"/>					
Date Spudded 2/3/68	Date Compl. Ready to Prod. 3/22/68		Total Depth 10,300		P.B.T.D. 10,233			
Elevations (DF, RKB, RT, GR, etc.) 4301 GL	Name of Producing Formation Upper Penn		Top Oil/Gas Pay 9390		Tubing Depth 9350			
Perforations 9390-94					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17	13 3/8	375	400 circ
10 3/4	8 5/8	3727	200
7 7/8	4 1/2	10,300	450
	2 3/8	9350	

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 3/22/68	Date of Test 3/28-29/68	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure -	Casing Pressure pkf	Choke Size -
Actual Prod. During Test 1475	Oil-Bbls. 185	Water-Bbls. 1290	Gas-MCF 200

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.

H. L. Smart

(Signature)

Agent

(Title)

3/29/68

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19

BY *[Signature]*

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.