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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
JUL 24 1 31 PM '68

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)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Opal	Well No. 1	Pool Name, including Formation Under N. Bagley Lower Penn	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter D ; 660 Feet From The North Line and 660 Feet From The West Line of Section 20 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 9119, 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 D	Sec. 20	Twp. 11 S	Rge. 33 E	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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5/30/68	Date Compl. Ready to Prod. 7/8/68		Total Depth 10,360		P.B.T.D. 10,298			
Elevations (DF, RKB, RT, GR, etc.) 4305 GR	Name of Producing Formation Lower Penn		Top Oil/Gas Pay 9908		Tubing Depth 9862			
Perforations 9908-10, 10,030-31, 10,070-72, 10,100-02, 10,133-34 10,193-96, 10,248-51					Depth Casing Shoe 10,360			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17	13 3/8		373		400			
11	8 5/8		3735		200			
7 7/8	4 1/2		10360		550			
	2 3/8		9862					

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 7/8/68	Date of Test 7/21-22/68	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hrs.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 1385	Oil-Bbls. 185	Water-Bbls. 1200	Gas-MCF 218

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.

A. L. Dmuth
(Signature)

Agent
(Title)

7/24/68
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19

BY *John W. Rungan*

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.