

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

LAND OFFICE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator Major, Giebel & Forster	
Address 1126 Vaughn Building, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of:
Incompletion ☐	Oil ☒ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESIGNATION OF WELL AND LEASE

Well Name T. P. State	Well No. Pool Name, Intersecting Formation 1 UNDESIGNATED	Kind of Lease State, Federal or Pool	Lease No. OG-2392
Location Unit Letter 0 ; 660 Feet From The South Line and 1980 Feet From The East			
Line of Section 36 Township 10-S Range 33-E, NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate Service Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) 3411 Knoxville Avenue, Lubbock, Texas 79413
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, Oklahoma 74100
Is well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
O 36 10-S 33-E	No

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.
XX			XX					
Date Spudded 6-29-68	Date Compl. Ready to Prod. 8-15-68	Total Depth 9960	P.B.T.D. 9953					
Elevations (DF, RKB, RT, GR, etc.) 4215 GL; 4227 DF	Name of Producing Formation Bough "C"	Top Oil/Gas Pay 9926	Tubing Depth 9920					
Perforations 9931 - 9939 w/2 JSPF	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2	12 3/4	383	350					
11	8 5/8	4056	400					
7 7/8	5 1/2	9960	400					

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)

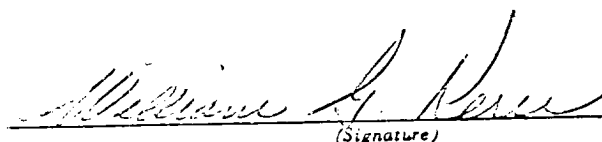
Date First New Oil Run To Tanks 8/14/68	Date of Test 8/15/68	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 215 psi	Casing Pressure 0-Packer	Choke Size 32/64
Actual Prod. During Test 325	Oil-Bbls. 294	Water-Bbls. 31	Gas-MCF 257

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.


(Signature)

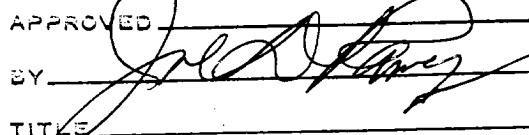
Engineer

(Title)

October 15, 1968

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
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.