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LAND OFFICE		
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
Stelts & 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:

Recompletion ☐ Oil ☐ Dry Gas ☐

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

UNDESIGNATED

Lease Name Vera	Well No. 1	Pool Name, including Formation North Bagley Lower Penn	Kind of Lease State, Federal or Fee State	Lease No. K-3985
Location North Bagley-Lower Pennsylvanian				
Unit: Letter E	1980	Feet From The North	Line and 810	From West
Line of Section 32	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"/> Admiral Crude Oil Corp.	Address (Give address to which approved copy of this form is to be sent) 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 E	Sec. 32	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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9/21/68	Date Compl. Ready to Prod. 11/1/68		Total Depth 10,350		P.B.T.D. 10,285			
Elevations (DF, RKB, RT, GR, etc.) 4298 GR	Name of Producing Formation Lower Penn		Top Oil/Gas Pay 10,120		Tubing Depth 10,110			
Perforations 10120-24, 10,198-200, 10,254-56					Depth Casing Shoe 10,350			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2	13 3/8		365		400			
11	8 5/8		3737		200			
7 7/8	4 1/2		10350		500			
	2 3/8		10110					

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 11/1/68	Date of Test 11/1-2/68	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 1204	Casing Pressure Flr	Choke Size 24/64"
Actual Prod. During Test 190	Oil-Bbls. 110	Water-Bbls. 80	Gas-MCF 119

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. Smith
(Signature)

Agent
(Title)

11/5/68
(Date)

OIL CONSERVATION COMMISSION

APPROVED

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.