

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	☐ OIL ☐ GAS
OPERATOR	
PRODUCTION OFFICE	

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-105
Effective 1-1-65

Operator Wagner & Brown	
Address Box 1714, Midland, Texas 79702	
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 ☐
Effective Date: July 1, 1978	

If change of ownership give name and address of previous owner: **Stoltz, Wagner & Brown, Box 1714, Midland, Texas 79702**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Doris	Well No., Well Name, Including Formation 1 North Bagley-Pennsylvanian	Kind of Lease State, Federal or Fee Fee	Lease No.
Location			
Unit Letter 0	553-9 Feet From The South Line and 1873-9 Feet From The East		
Line of Section 18	Township 11-S	Range 33-E	County Lea

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Amoco Pipe Line Company	Ft. Worth, Texas 76102
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Warren Petroleum Corporation	2300 Continental National Bank Building
If well produces oil or liquids, give location of tanks.	Is gas actually connected? when
0 18 11S 33E	Yes 6/14/69

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 Reentry	Drill Reentry
Date Spudded	Date Compn. Ready to Prod.	Total Depth	P.E.T.D.					
Elevations (DF, RAB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoes							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be either recovery of total volume of load oil and must be equal to or exceed top oil available for this depth or be for full 24 hours.)

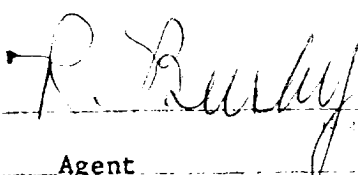
Date Started (New Oil Well To Tanks)	Date of Test	Producing Method (Pump, gas lift, etc.)	
Length of Test	Testing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bois.	Water-Bois.	Gas-MCF

GAS WELL

Actual Prod. Test-Bois.	Length of Test	Bois. Condensate/MCF	Gravity of Condensate
Testing Pressure (inches Hg.)	Testing Pressure (inches Hg.)	Casing Pressure (inches Hg.)	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

June 15, 1978

OIL CONSERVATION COMMISSION

APPROVED **JUL 4 1978**, 19
BY **Orig. Signed by**
John Runyan
TITLE **Geologist**

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 test taken on the well in accordance with RULE 1111.

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 Form C-104 must be filed for each pool in multiple completed wells.