

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION 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-110
Effective 1-1-65

I. Operator
The Superior Oil Company

Address
P. O. Box 1900, Midland, Texas 79701

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)
THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE. **R-3911**

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Levinson	Well No. 1	Pool Name, including Formation Undesignated - Rough "C"	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter J 1980 Feet From The South Line and 2130 Feet From The East Line of Section 22 Township 9-S Range 34-E , NMFM, Lee 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"/> Pernian Corporation (Trucks)	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Unknown at present	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 J	Sec. 22	Twp. 9-S	Rge. 34-E
	Is gas actually connected? No			When Est. January 8, 1970

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 Oct. 20, 1969	Date Compl. Ready to Prod. December 10, 1969		Total Depth 9950		P.B.T.D. 9878			
Elevations (DF, RKB, RT, GR, etc.) KB-4240; GL-4228	Name of Producing Formation Rough "C"		Top Oil/Gas Pay 9817 (-5577)		Tubing Depth 9804			
Perforations 9827-33 with 4 JSPP					Depth Casing Shoe 9950			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13"	11-3/4", 42#, N-40, STEEL		400		400			
11"	8-5/8", 32#, J-55, STEEL		4200		615			
7-7/8"	5-1/2", 17#, N-80 & J-55		9950		250			
2-3/8", 4.7#, N-80 tubing latched into Model "T" packer at 9804'								

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)

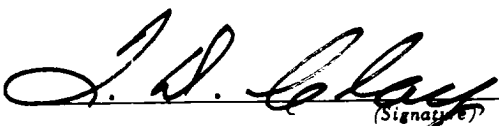
Date First New Oil Run To Tanks December 10, 1969	Date of Test December 11, 1969	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 100-125	Casing Pressure Packer	Choke Size 3/4
Actual Prod. During Test 399	Oil - Bbls. 337	Water - Bbls. 62	Gas - MCF 744

GAS WELL

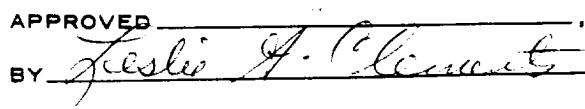
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.


T. D. Clay
Production Engineer
December 11, 1969

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.