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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  
Amini Oil Corporation  
Address  
400 Wall Towers West - 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)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE  
Lease Name Mathers Well No. 1 Pool Name, Including Formation North Bagley Lower Penn- (Indesignated) Kind of Lease Fee Lease No.  
Location  
Unit Letter L ; 660 Feet From The West Line and 2130 Feet From The South  
Line of Section 33 Township 11-S Range 33-E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
The Permian Corporation Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 3119, Midland, Texas  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
Warren Petroleum Corporation Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 1589, Tulsa, Oklahoma  
If well produces oil or liquids, give location of tanks. Unit L Sec. 33 Twp. 11-S Rge. 33-E Is gas actually connected? No When As soon as possible

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA  
Designate Type of Completion - (X) Oil Well ☒ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☐  
Date Spudded 11-6-69 Date Compl. Ready to Prod. 12-18-69 Total Depth 10246 P.B.T.D. 10185  
Elevations (DF, RKB, RT, GR, etc.) 4271 GR Name of Producing Formation Lower Penn Top Oil/Gas Pay 9957 Tubing Depth 9794  
Perforations 9957, 59, 61, 63, 65, 67, 69, 71, 73, 75, 85, 87, 10018, 39&41 Depth Casing Shoe 10246  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
17-1/2" 12-3/4" 362 350  
11" 8-5/8" 3740 400  
7-7/8" 5-1/2" 10251 600

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 12-18-69 Date of Test 12-19-69 Producing Method (Flow, pump, gas lift, etc.) Pumping (4 x 3-5/16 x 2-1/4 Sargent Hyd)  
Length of Test 24 hours Tubing Pressure 1800 Casing Pressure 65 Choke Size --  
Actual Prod. During Test Oil-Bbls. 290 Water-Bbls. 330 Gas-MCF 288

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)

Agent

(Title)

12-19-69

(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.