

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

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SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

I. Operator
Coastal States Gas Producing Company
Address
P. O. Box 235, 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
DEVELOPED BY YOU DO NOT CONCUR
REGARDING SAME

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Santa Fe	Well No. 4	Pool Name, including Formation H. T. V. Sawyer (San Andres)	Kind of Lease State, Federal or Fee Fee	Lease No. ---
Location Unit Letter H ; 1980 Feet From The North Line and 660 Feet From The east Line of Section 33 Township 9D Range 37E , 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"/> The Permian Corporation	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 type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent) None					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 33	Twp. 9S	Rge. 37E	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 X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12-16-69	Date Compl. Ready to Prod. 1-2-70	Total Depth 5049'	P.B.T.D. ---					
Elevations (DF, RKB, RT, GR, etc., 3977' GR	Name of Producing Formation San Andres	Top Oil/Gas Pay 4952'	Tubing Depth 4852'					
Perforations 4952-58', 4964-73' and 4989-5008'			Depth Casing Shoe ---					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
11"	8-5/8"	394'	350 SXS					
7-7/8"	4-1/2"	5049'	250 SXS					
4-1/2"	2-3/8"	4852'	---					

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 ---	Date of Test 1-6-70	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 220#	Casing Pressure ---	Choke Size 18/64"
Actual Prod. During Test 157	Oil-Bbls. 157	Water-Bbls. ---	Gas-MCF 100

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)

Division Production Manager
(Title)

January 12, 1970
(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.