

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

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

I. Operator  
Major, Giebel & Forster  
Address  
1126 Vaughn Building, 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.

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Amerada Federal Well No. 1 Pool Name, including Formation North Bagley Upper Penn. Kind of Lease Federal Lease No. NM0556674  
Location  
Unit Letter M ; 660 Feet From The South Line and 510 Feet From The West  
Line of Section 3 Township 12-S Range 33-E, NMPM, Lea County

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)  
Admiral Crude Box 1345, Midland, Texas 79701  
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 Box 1589, Tulsa, Oklahoma 74100  
If well produces oil or liquids, give location of tanks. Unit M Sec. 3 Twp. 12 Rge. 33 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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 4-30-70	Date Compl. Ready to Prod. 6-25-70	Total Depth 10,080'	P.B.T.D. 9535'					
Elevations (DF, RKB, RT, GR, etc.) 4263 RKB, 4251 GR	Name of Producing Formation Dallas	Top Oil/Gas Pay 9451'	Tubing Depth 9318'					
Perforations 9451, 9461, 9469, 9480, 9502, 9504' w/1 JSPF			Depth Casing Shoe 10,080'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 17 1/2	CASING & TUBING SIZE 12 3/4		DEPTH SET 405		SACKS CEMENT 400			
11	8 5/8		3,780		400			
7 7/8	4 1/2		10,080		450			

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 6-24-70	Date of Test 6-25-70	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 525	Casing Pressure Pkr	Choke Size 24/64"
Actual Prod. During Test 657	Oil-Bbls. 372	Water-Bbls. 285	Gas-MCF 613

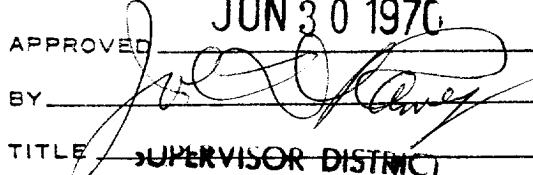
GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

  
Engineer (Title)  
June 26, 1970 (Date)

OIL CONSERVATION COMMISSION  
JUN 30 1970  
APPROVED \_\_\_\_\_, 19\_\_\_\_\_  
BY   
TITLE SUPERVISOR DISTRICT

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.