

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-11
Effective 1-1-65

Operator
DAMSON OIL CORP.

Address
5710 Opelousas Street, Lake Charles, LA 70601

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐		
Recompletion ☐	Casinghead Gas ☐ Condensate ☐		
Change in Ownership ☒			

If change of ownership give name and address of previous owner MIDCO ENERGY, INC., 406 Petroleum Bldg., Midland, TX 79701

DESCRIPTION OF WELL AND LEASE

Lease Name Sheridan "A"	Well No. 1	Pool Name, including Formation Vada Penn	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter C : 660 Feet From The N Line and 1980 Feet From The W Line of Section 24 Township 9-S Range 33-E, NMPM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Mobil Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 900, Dallas, TX 75221				
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Warren Petroleum	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 C	Sec. 24	Twp. 9-S	Rge. 33-E	Is gas actually connected? When

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

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	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth				
Perforations			Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET			SACKS CEMENT				

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	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

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

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.

John F. Davies

John F. Davies
(Signature)

District Manager

9/28/78
(Date)

OIL CONSERVATION COMMISSION

APPROVED 0613 1978, 19

BY *Jerry Beaman*
TITLE Dist. L. Secy.

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepening well, this form must be accompanied by a tabulation of the deviate 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 with name or number, or transporter, or other such change of conditions.