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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
Blackrock Oil Company
Address
1000 V & J Tower, Midland, Texas, 79701
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mobil Atlantic Fed.	Well No. 2	Pool Name, including Formation Allison Penn.	Kind of Lease State, Federal or Fee Fed.
Location Unit Letter B ; 660 Feet From The N Line and 1980 Feet From The E Line of Section 10 , Township 9-S Range 36-E , 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"/> Mobil Pipe Line Company - Trucks	Address (Give address to which approved copy of this form is to be sent) Box 633, Midland, Texas, 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service Oil Company	Address (Give address to which approved copy of this form is to be sent) Box 300, Tulsa, Oklahoma, 74102					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 10	Twp. 9-S	Rge. 36-E	Is gas actually connected? No	When 2-3 weeks

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	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded 7-15-70	Date Compl. Ready to Prod. 8-24-70		Total Depth 9906'		P.B.T.D. 9877'			
Pool Allison	Name of Producing Formation Penn.		Top Oil/Gas Pay 9839'		Tubing Depth 9788'			
Perforations 10 holes 9839 - 9865'					Depth Casing Shoe 9905'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15	12 3/4		400		400			
11	8 5/8		4145		200			
7 7/8	4 1/2		9905		375			
	2 3/8		9788					

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 8/24/70	Date of Test: 8/24/70	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 300	Casing Pressure Packer	Choke Size 24/64
Actual Prod. During Test	Oil-Bbls. 388	Water-Bbls. 46	Gas-MCF 416

GAS WELL

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

Peggy L. Holden
(Signature)
Peggy L. Holden, Agent
(Title)
8/27/70
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY **Peggy L. Holden**
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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.