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TRANSPORTER	OIL
	GAS
OPERATOR	
PROJECT 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

Operator  
**Belco Petroleum Corporation**  
Address  
**2000 Wilco Building, Midland, Texas 79701**

Reasons for filing (Check proper box)  
 New Well  Change in Transporter of:  
 Recompletion  Oil  Dry Gas   
 Change in Ownership  Casinghead Gas  Condensate   
 Other (Please explain)  
**CASINGHEAD GAS MUST NOT BE FLARED AFTER 9/10/71 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.**

If change in ownership give name and address of previous owner  
**THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.**

**II. DESIGNATION OF WELL AND LEASE**  
 Lease State **Midwest State** Well No. **2** Pool Name, including Formation **Vada (Penn) R-4194** Kind of Lease **XXXXXXX State** Lease No. **E-9236**  
 Location  
 Unit Letter **F** ; **1980** Feet From The **North** Line and **2130** Feet From The **West**  
 Line Section **2** Township **9-S** Range **34-E** , NMPM, **Lea** County

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**  
 Name of Authorized Transporter of Oil  or Condensate   
**Mobil Oil Corporation (Trucks)** Address (Give address to which approved copy of this form is to be sent)  
**Box 900, Dallas, Texas 75221**  
 Name of Authorized Transporter of Casinghead Gas  or Dry Gas  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 **F** Sec. **2** Twp. **9-S** Rge. **34-E** Is gas actually connected? **No** When **60 Days**

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  Gas Well  New Well  Workover  Deepen  Plug Back  Same Res'v.  Diff. Res'v.   
 Date Spudded **5-26-71** Date Compl. Ready to Prod. **7-19-71** Total Depth **9700'** P.B.T.D. **9682'**  
 Equivalent (DF, RAB, RT, GR, etc.) **4262' K.B.** Name of Producing Formation **Bough "C"** Top Oil/Gas Pay **9645'** Tubing Depth **9566'**  
 Perforations **9645' - 9663'** Depth Casing Shoe **9700'**

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	12-3/4"	375'	350
11"	8-5/8"	3954'	375
7-7/8"	4-1/2"	9700'	300

**V. TEST DATA AND REQUEST FOR ALLOWABLE** (Test must be after recovery of total gas and oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)  
**OIL WELL**  
 Date First New Oil Run To Tanks **7-16-71** Date of Test **7-21-71** Producing Method (Flow, pump, gas lift, etc.) **Hydraulic Pump**  
 Length of Test **24 Hours** Tubing Pressure **2200** Casing Pressure **40** Choke Size **None**  
 Actual Prod. During Test Oil - Bbls. **238** Water - Bbls. **857** Gas - MCF **94**

**GAS WELL**  
 Actual Prod. Test - MCF/D \_\_\_\_\_ Length of Test \_\_\_\_\_ Bbls. Condensate - MCF \_\_\_\_\_ 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.  
**Grann Cope** (Signature)  
**District Engineer** (Title)  
 OIL CONSERVATION COMMISSION  
 APPROVED **JUL 30 1971**  
 BY **[Signature]**  
 TITLE **SUPERVISOR DISTRICT I**  
 This form is to be filed in compliance with RULE 1104.  
 If this is a request for allowable for a newly drilled or completed 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 or non-allowable completion wells.

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JUL 20 1971

OIL CONSERVATION COMM.  
HOBBS, N. M.