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TRANSPORTER	OIL	
	GAS	
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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 **Oil Development Company of Texas**

Address **900 Polk Street, Amarillo, Texas 79101**

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input checked="" type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain) **CASINGHEAD GAS MUST NOT BE FLARED AFTER 10/16/71 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.**

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal "27"	Well No. 1	Pool Name, Including Formation West Sawyer (San Andres)	Kind of Lease State, Federal or Fee Federal	Lease No. NM2390
Location D 660 North 660 West				
Unit Letter 27 Feet From The 96 Line and 37E Feet From The Lea County				
Line of Section 27 Township 96 Range 37E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> MOBIL Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 D Sec. 27 Twp. 96 Rge. 37E	Is gas actually connected? <input type="checkbox"/> 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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 7-19-71	Date Compl. Ready to Prod. 8-11-71	Total Depth 5030'	P.B.T.D. 5015'					
Elevations (D.F., R.K.B., RT., GR., etc.) 3380' RKB	Name of Producing Formation San Andres	Top Oil/Gas Pay 4944'	Tubing Depth 5000'					
Perforations 4944-60' & 4979-96'	Depth Casing Shoe 5030'							
TUBING, CASING, AND CEMENTING RECORD								
11" HOLE SIZE	CASING & TUBING SIZE 8-5/8"	DEPTH SET 450'	SACKS CEMENT 325					
7-7/8"	4-1/2"	5030'	250					
4-1/2"	2-3/8"	5000'	--					

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 8-8-71	Date of Test 8-11-71	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24'	Tubing Pressure --	Casing Pressure 15 psig	Choke Size --
Actual Prod. During Test 186 BBL	Oil - Bbls. 166 BBL	Water - Bbls. 0.8	Gas - MCF 43.7

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.

Chief Engineer

August 13, 1971

(Date)

OIL CONSERVATION COMMISSION
AUG 16 1971
APPROVED _____, 19____
BY **John J. Jones**
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 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.

APR 21 1971

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AUG 16 1971

OIL CONSERVATION COMM.
HOBBS, N. M.