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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 Bridwell Oil Company		
Address Box 2038, Abilene, Texas 79604		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	CASINGHEAD GAS MUST NOT BE STARTED AFTER 2/1/73 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of 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. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico 7 State	Well No. 1	Pool Name, including Formation Flying "M" San Andres	Kind of Lease State, Federal or Fee State	Lease No. K-3354
Location Unit Letter <u>H</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>7</u> Township <u>9-S</u> Range <u>33-E</u> , 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 Oil Corp. - 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 <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> None	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. 7	Twp. 9-S	Rge. 33-E	Is gas actually connected? No

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'v.	Diff. Res'v.
Date Spudded 3-16-73	Date Compl. Ready to Prod. 4-23-73	Total Depth 4480		P.B.T.D. 4450					
Elevations (DF, RKB, RT, GR, etc.) 4393' Gr.	Name of Producing Formation San Andres	Top Oil/Gas Pay 4396		Tubing Depth 4360					
Perforations 4396-4402'; 4404-10'; 4417-23'; 4430-36'; 4440-50'.		Depth Casing Shoe 4480							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12-1/4	8-5/8		372		275				
7- 7/8	4-1/2		4480		250				

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 4-23-73	Date of Test 4-27-73	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test	Oil-Bbls. 80	Water-Bbls. 40	Gas-MCF 40

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.

Bruce Leroy
(Signature)
Production Superintendent
(Title)
April 28, 1973
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY John D. Honey
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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

INCLINATION REPORT

OPERATOR Bridwell Oil Company ADDRESS P. O. Box 2038, Abilene, Tx. 79604

LEASE New Mexico State 7 WELL NO. 1 FIELD Flying "M" San Andres

LOCATION 1980' FNL & 660' FEL, Sec. 7, T-9S, R-33E, Lea County, N. M.

Depth	Angle Inclination (degrees)	Displacement	Displacement Accumulated
372	1/4	1.6368	1.6368
870	1/4	2.1912	3.8280
1147	1/2	2.4099	6.2379
1735	3/4	7.7028	13.9407
2230	3/4	6.4845	20.4252
2688	1 1/2	11.9996	32.4248
2748	1 1/2	1.5720	33.9968
3188	1 3/4	13.4200	47.4168
3450	1 1/4	5.7116	53.1284
3677	1 1/2	5.9474	59.0758
3968	3/4	3.8121	62.8879
4118	1 1/4	3.2700	66.1579
4250	1 1/2	3.4584	69.6163
4480	1/2	2.0010	71.6173

I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

Cactus Drilling Company

Ken Hedrick
Title: Ken Hedrick, Drilling Supt.

Affidavit:

Before me, the undersigned authority, appeared Ken Hedrick known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such well was not intentionally deviated from the true vertical whatsoever.

Ken Hedrick
(Affiant's Signature)

Sworn and subscribed to in my presence on this the 2 day of

April 19 73.