

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PERCRAVION 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  
Oil Development Company of Texas  
Address  
American National Bank Bldg., P. O. Box 12058, Amarillo, Tx 79101  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name SFPRR	Well No. 18	Pool Name, including Formation West Sawyer	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter I ; 1980 Feet From The South Line and 660 Feet From The East Line of Section 28 Township 9S Range 37E , 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 Pipeline Corporation	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 <input checked="" 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) P. O. Box 300, Tulsa, Oklahoma 74102					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 33	Twp. 9S	Rge. 37E	Is gas actually connected? yes	When 1/3/77

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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 10-4-76	Date Compl. Ready to Prod. 12-6-76		Total Depth 5022'		P.B.T.D. 5011'			
Elevations (DF, RKB, RT, GR, etc.) KB 3982	Name of Producing Formation San Andres		Top Oil/Gas Pay 4934		Tubing Depth 5000'			
Perforations 4934-39, 4942-63, 4966-70, 4977-94, 4998-5004			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		431		300			
7-7/8"	4-1/2"		5020		1010			
	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 1/3/77	Date of Test 1/7/77	Producing Method (Flow, pump, gas lift, etc.) Pump - 1-1/2" insert	
Length of Test 24 hr	Tubing Pressure 35 psig	Casing Pressure	Choke Size
Actual Prod. During Test 114.9	Oil-Bbls. 57.5	Water-Bbls. 57.5	Gas-MCF 72

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.

[Signature]  
(Signature)

Petroleum Engineer  
(Title)

January 12, 1977  
(Date)

OIL CONSERVATION COMMISSION

APPROVED [Signature], 19\_\_\_\_  
BY [Signature]  
TITLE SUPERVISOR

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

RECEIVED

JAN 1 1977

OIL CONCENTRATION ON ODOM.  
HOBBS, N. M.