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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

Operator Charles F. Harding	
Address 4317 Oak Lawn Avenue - Dallas, Texas 75219	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	CASINGHEAD GAS MUST NOT BE FLARED AFTER 4/1/78 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE		Bar 4 Mississippian R-5754	
Lease Name State "3"	Well No. 1	Pool Name, including Formation undesignated (Mississippian)	Kind of Lease State, Federal or Fee State
Lease No. L-3021			
Location			
Unit Letter G	2310	Feet From The N	Line and 1980
Feet From The E			
Line of Section 3	Township 9-S	Range 32-E	NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		SCURLOCK PERMIAN CORP EFF 9-1-91	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
The Permian Corporation	P.O. Box 1183, Houston, Texas 77001		
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 G	Sec. 3	Twp. 9-S
	Pge. 32-E	Is gas actually connected? no	When as soon as possible

If this production is commingled with that from any other lease or pool, give commingling order number: no

COMPLETION DATA		Oil Well		Gas Well		New Well		Workover		Deepen		Plug Back		Same Res'v.		Diff. Res'v.	
Designate Type of Completion - (X)		X				X											
Date Spudded 11-4-77	Date Compl. Ready to Prod. 1-24-78		Total Depth 11,192'		P.B.T.D. 10,897'												
Elevations (DF, RKB, RT, GR, etc.) 4415 GR	Name of Producing Formation Mississippian		Top Oil/Gas Pay 10,438		Tubing Depth 10,680												
Perforations 10,703-723, 10,691-695, 10,893-897, 10,734-738						Depth Casing Shoe 11,208											

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	12 3/4	375	400
11	8 5/8	3600	800
7 7/8	4 1/2	11,208	625
4 1/2	2 3/8	10,680	none

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 1-24-78	Date of Test 2-9-78	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs.	Tubing Pressure 120	Casing Pressure pkr.	Choke Size 16/64
Actual Prod. During Test	Oil-Bbls. 51	Water-Bbls. trace	Gas-MCF 155

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

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED _____, 19____	
		BY <u>John W. Ryan</u>	
		TITLE _____	
(Signature)		This form is to be filed in compliance with RULE 1104.	
(Title)		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 and recompleted wells.	

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OIL CONSERVATION COMM.
HOBBS, N. M.