

DISTRIBUTION			
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.S.G.S.			
AND 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  
Effective 1-1-65

I.

Operator Petroleum Reserve Corporation		
Address 4815 S. Harvard, Suite 305, Tulsa, Oklahoma 74135 3096		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input checked="" 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Termeco State	Well No. 1	Pool Name, Including Formation Sand Springs Dev.	Kind of Lease State, Federal or Fee	State State	Lease No. L 3025
Location					
Unit Letter <u>p</u> ; <u>330</u> Feet From The <u>South</u> Line and <u>990'</u> Feet From The <u>East</u>					
Line of Section <u>2</u> Township <u>11S</u> Range <u>34E</u> , NMPM, <u>Lea</u> 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"/>	Address (Give address to which approved copy of this form is to be sent)					
Navajo Refining Co.	Box 149, Artesia, N.M. 88210					
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)					
No gas						
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 2	Twp. 11S	Rge. 34E	Is gas actually connected? No gas	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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
	XX							
Date Spudded 1/21/78	Date Compl. Ready to Prod. 5/25/78		Total Depth 13,180		P.B.T.D. 13,172			
Elevations (DF, RKB, RT, GR, etc.) 4134 GR 4149 KB	Name of Producing Formation Devonian		Top Oil/Gas Pay 13,162		Tubing Depth 12,990			
Perforations 14,144-13,167					Depth Casing Shoe 13,180			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		457		450 SXS.			
11"	8 5/8"		4176		1525 SXS.			
7 7/8"	5 1/2"		13,180		455 SXS.			
5 1/2"	2 7/8"		12,990					

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 5/25/78	Date of Test 5/26/78	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 4 hrs.	Tubing Pressure 775	Casing Pressure Packer	Choke Size 6/64"
Actual Prod. During Test 14.6 bbo	Oil-Bbls. 87.6	Water-Bbls. 0	Gas-MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	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.

Frank Sarmann  
(Signature)  
Frank Sarmann, Engineer  
(Title)  
June 1, 1983  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 15 1983, 19  
BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
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 deviating 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 well to produce