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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

I. Operator **AMERICAN PETROFINA COMPANY OF TEXAS**

Address **Box 1311, Big Spring, Texas 79720**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☒ Casinghead Gas ☐ Condensate ☐

Change in Ownership ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal "P"	Well No. 1	Pool Name, including Formation Prairie, San Andres South	Kind of Lease State, Federal or Fee Federal	Lease No. NM 02915
Location Unit Letter D ; 660 Feet From The North Line and 660 Feet From The West				
Line of Section 21 Township 8-S Range 36-E , NMPM, Roosevelt 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 Corporation - Trucks	Address (Give address to which approved copy of this form is to be sent) Box 633, Midland, Texas 79701	
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) Cities Service Bldg., Bartlesville, Okla 74003	
If well produces oil or liquids, give location of tanks.	Unit D Sec. 21 Twp. 8S Rge. 36E	Is gas actually connected? Yes When October 1, 1961

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.
	X					X		X
Date Spudded 3-10-61	Date Compl. Ready to Prod. 12-20-71		Total Depth 9725		P.B.T.D. 5064			
Elevations (DF, RKB, RT, GR, etc.) 4142 DF	Name of Producing Formation San Andres		Top Oil/Gas Pay 4846		Tubing Depth 4923			
Perforations 4846, 4860, 4893, 4900, 4901, 4909, 4911, 4913, 4931, 4934, 4941, 4968, 4971, 4974, & 4975					Depth Casing Shoe 9725			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/4	13-3/8		469		450			
11	8-5/8		4200		1800			
7-7/8	4-1/2		9725		200			
	2-3/8		4923					

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 12-20-71	Date of Test 1-3-72	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure 0	Casing Pressure 0	Choke Size 2"
Actual Prod. During Test	Oil-Bbls. 8	Water-Bbls. 32	Gas-MCF 13.14

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.

R. C. Bort

R. C. Bort

(Signature)

Assistant District Manager of Production

(Title)

January 12, 1972

(Date)

OIL CONSERVATION COMMISSION

APPROVED **JAN 14 1972**, 19
BY **[Signature]**
TITLE **SU. INSOR DISTRICT**

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.