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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PROBATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Superseding Old C-101 and C-116
Effective 1-1-65

Operator Dwight A. Tipton	
Address c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☒	Casinghead Gas ☐ Condensate ☐
Effective 4/1/77	

If change of ownership give name **Deck Oil Co., 2702 4th National Bank Bldg., Tulsa, Oklahoma 74119**
and address of previous owner

NM-060177

I. DESCRIPTION OF WELL AND LEASE				
Lease Name Shearn Federal	Well No. 1	Pool Name, including Formation Allison Penn	Kind of Lease State, Federal or Fee Federal	Lease No. above
Location				
Unit Letter P	554	Feet From The South	Line and 554	Feet From The East
Line of Section 13	Township 8S	Range 36E	, NMPM, Roosevelt County	

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil ☒ or Condensate ☐		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 ☒ or Dry Gas ☐		Address (Give address to which approved copy of this form is to be sent)		
Warren Petroleum Company		P. O. Box 1583, Tulsa, Oklahoma 74102		
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 13	Twp. 8S	Rge. 36E
Is gas actually connected?		When		
Yes		Reconnect 4/5/77		

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA				
Designate Type of Completion - (X)				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	

VI. 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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

I. 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 <u>4/25/77</u> , 19__	
ORIG. SIGNED BY: DONNA HOLLER		BY <u>John Runyan</u> <u>Geologist</u>	
(Signature) Agent		Orig. Signed by <u>Jerry Sexton</u> Dist. 1, Supv.	
5/24/77 (Date)		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 change of owner, well name or number, or transporter, or other such change of condition.	

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