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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

FEB 22 1 30 PM '66

Operator Dalpert Oil Corporation	
Address 3471 First National Bank Bldg. Dallas, Texas 75202	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input 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

DESCRIPTION OF WELL AND LEASE

Lease Name Federal	Lease No. MM-042253	Well No. 2	Pool Name, including Formation Chaveroe-San Andres	Kind of Lease State Federal or State
Location				
Unit Letter L	1980	Feet From The South	Line and 660	Feet From The West
Line of Section 27	Township 7-S	Range 33E	, NMPM, Roosevelt County	

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) % Don Kennedy, P. O. Box 900, Dallas, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 19598, Dallas, Texas					
If well produces oil or liquids, give location of tanks.	Unit L/M	Sec. 27	Twp. 7-S	Rge. 33-E	Is gas actually connected? No	When Approx. March 15, 1966

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

COMPLETION DATA

Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input 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 Feb. 4, 1966	Date Compl. Ready to Prod. Feb. 22nd, 1966		Total Depth 4450		P.B.T.D. 4447				
Elevations (DF, RKB, RT, GR, etc.) 4409 GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 4447		Tubing Depth 4447				
Perforations 4200-4207-4232-4249-4260-4271-4280-4297-4308-4313-4318		TUBING, CASING, AND CEMENTING RECORD		Depth Casing Shoe 4447					
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
11"	8 5/8"		387'		200				
7 7/8"	4 1/2"		4447'		300				
	2 3/8"		4447'						

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 Feb. 23rd, 1966	Date of Test Feb. 24th, 1966	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 2 Hrs.	Tubing Pressure 300#	Casing Pressure -	Choke Size 19/64ths
Actual Prod. During Test 13.75 Bbls	Oil-Bbls. 13.75 Bbls	Water-Bbls. 0	Gas-MCF 8

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.

W. T. Adams
(Signature)
President
(Title)
February 24th, 1966
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
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 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.