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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE DEBITS OF OIL
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
MAY 25 1966

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator Champlin Petroleum Company		Non-Operator: Warren American Oil Company	
Address P. O. Box 1797, Midland, Texas			
Reason(s) for filing (Check proper box)		Other (Please explain)	
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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Farrell-Federal	Well No. 3	Pool Name, Including Formation Chavero-San Andres R-3080 Undesignated	Kind of Lease State, Federal or Fee Federal	Lease No. 0108997
Location Unit Letter I ; 660 Feet From The East Line and 1980 Feet From The South Line of Section 30 Township 7-8 Range 33-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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas					
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. 30	Twp. 7-8	Rge. 33-E	Is gas actually connected? Vented	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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded 5-4-66	Date Compl. Ready to Prod. 5-22-66		Total Depth 4442'		P.B.T.D. 4440'			
Elevations (DF, RKB, RT, GR, etc.) 4441' DF	Name of Producing Formation San Andres		Top Oil/Gas Pay 4016 (+425)		Tubing Depth 4406'			
Perforations 2 shots each @ 4183, 4209, 4250, 4262, 4281, 4293, 4324, 4371, & 4387'. 1 shot each @ 4177 & 4331'.					Depth Casing Shoe 4442'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8", 20#		361'		250 sacks - circulated			
7-7/8"	4-1/2", 9.5#		4442'		325 sacks			

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 5-21-66	Date of Test 5-21-66	Producing Method (Flow, pump, gas lift, etc.) Swabbing	
Length of Test 24 hrs.	Tubing Pressure --	Casing Pressure --	Choke Size --
Actual Prod. During Test 365 bbls.	Oil - Bbls. 75	Water - Bbls. 290	Gas - MCF NIL

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.
Form C-102 designating allocated acreage of 40 acres previously filed with permit to drill.

H. N. Brown
H. N. Brown (Signature)
District Superintendent (Title)

May 24, 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.

NOTES OFFICE G. C. C.

DEVIATION TESTS TAKEN ON FARRELL-FEDERAL NO. 3
State Unit-I, 6605 FAR #1, 1960 UPL, Section 30,
T-7-S, R-33-E, Roosevelt County, New Mexico.

<u>DEPTH</u>	<u>DEGREES</u>
357'	1/2
872'	1/2
1349'	1
1842'	1-1/2
2078'	1-1/4
2572'	3/4
3017'	1-1/2
3462'	1-1/2
3780'	1-1/4
4005'	1/4
4195'	3/4
4320'	1/2
4440'	1/4

STATE OF TEXAS

COUNTY OF MIDLAND

BEFORE ME, the undersigned authority, on this day personally appeared

H. J. B. B. B. B., known to me to be the person whose name is
subscribed to the foregoing and acknowledged to me that he executed
the same for the purpose expressed.

Given under my hand and seal of office this the 24th day of May
A.D. 1966.

Gayle Wood
Notary Public in and for Midland, County, Texas