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

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE OFFICE O. C. C.
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
JUN 7 1966 RM366

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

Operator Southern Petroleum Exploration, Inc.	
Address Box 1434, Roswell, New Mexico	
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 State X	Well No. 2	Pool Name, Including Formation Undesignated - San Andres	Kind of Lease State, Federal or Fee	State State	Lease No. K-2672
Location Chavero - San Andres R-3080					
Unit Letter E	1980	Feet From The North	Line and 660	Feet From The West	
Line of Section 36	Township 7-S	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"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas 79704	
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 75219	
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 36
	Twp. 7-S	Rge. 33-E
	Is gas actually connected? No	
	When	

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

None

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 Rest'v.	Diff. Rest'v.
Date Spudded 5-16-66	Date Compl. Ready to Prod. 5-26-66		Total Depth 4460		P.B.T.D. 4418			
Elevations (DF, RKB, RT, GR, etc.) 4331 GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 4221		Tubing Depth 4176			
Perforations 4221-4351					Depth Casing Shoe 4458			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		356'		200			
7-7/8"	4-1/2"		4458'		350			
	2"		4176'					

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 5-26-66	Date of Test 6-4-66	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 5 hours	Tubing Pressure 125#	Casing Pressure 475#	Choke Size 30/64"
Actual Prod. During Test 50 bbls.	Oil - Bbls. 50	Water - Bbls. None	Gas - MCF 42

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

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.

Re. Huh
(Signature)

District Land Manager
(Title)

June 6, 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.