

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

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

I.

Operator Dalport Oil Corporation	
Address 3471 First National Bank Bldg. Dallas, Texas 75202	
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 Federal "22"	Well No. 2	Pool Name, Including Formation Chaveroo San Andres	Kind of Lease Permian, Federal	Lease No. MI-042253
Location Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line of Section 22 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"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3319 Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Capitan, Inc	Address (Give address to which approved copy of this form is to be sent) Box 19598 Dallas, Texas					
If well produces oil or liquids, give location of tanks.	Unit D/P	Sec. 22	Twp. 7-S	Rge. 33-E	Is gas actually connected? No-vented	When Approx. Oct. 1st, 1966

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'v.	Diff. Res'v.
Date Spudded 8-18-66	Date Compl. Ready to Prod. Sept. 2nd, 1966		Total Depth 4418		P.B.T.D. 4380			
Elevations (DF, RKB, RT, GR, etc.) Chaveroo	Name of Producing Formation San Andres		Top Oil/Gas Pay 4139		Tubing Depth 4127.74 KB			
Perforations 4139, 46, 59, 62, 88, 4202, 4207, 18, 19, 27, 35, 40, 46, 51, 59, 61, 74		TUBING, CASING, AND CEMENTING RECORD		Depth Casing Shoe 4416				
HOLE SIZE 11" 7 7/8	CASING & TUBING SIZE 8 5/8" 4 1/2 2 3/8		DEPTH SET 376 4416 4127.74		SACKS CEMENT 200 300 None			

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 Sept 6, 1966	Date of Test Sept 6, 1966	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 3 hrs	Tubing Pressure 60	Casing Pressure 500	Choke Size 34/64
Actual Prod. During Test 56	Oil-Bbls. 56	Water-Bbls. 0	Gas-MCF 39.2

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.

W. F. Leung
(Signature)
President
(Title)
September 7th, 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.