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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

SEP 30 1968

I. Operator
Southwestern Natural Gas, Inc.
Address
900 Bank of the Southwest Midland, Texas 79701
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner Southwestern Natural Gas, Inc.

II. DESCRIPTION OF WELL AND LEASE
Lease Name Shell Federal "35" Lease No. 1 Well No. 1 (Chaveroo - San Andres) Lease No. NM 0367781-B
Kind of Lease Federal
Location
Unit Letter E 1980 Feet From The North Line and 660 Feet From The West
Line of Section 35 Township 7-S Range 32-E, NMFM, Roosevelt County

III. 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)
Permian Corporation Midland, Texas
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ 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 E Sec. 35 Twp. 7-S Rge. 32-E Is gas actually connected? No 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 Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
X
Date Spudded 4-12-68 Date Compl. Ready to Prod. 7-22-68 Total Depth 9097 P.B.T.D. 4695
Elevations (DF, RKB, RT, GR, etc.) 4483 GL Name of Producing Formation San Andres Top Oil/Gas Pay 4194 Tubing Depth 4186
Perforations 4194 to 4371 Depth Casing Shoe 4710
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17 1/2 13 3/8 420 330
11 8 5/8 4710 400
7 7/8 4 1/2 8855 150

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 7-24-68 Date of Test 8-1-68 Producing Method (Flow, pump, gas lift, etc.) Pump - 1 1/2" Insert
Length of Test 24 hours Tubing Pressure -- Casing Pressure 50 Choke Size --
Actual Prod. During Test 72 Oil-Bbls. 72 Water-Bbls. 46 Gas-MCF 72

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

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.
John McCammon (Signature)
XXXXXX Office Manager (Title)
August 30, 1968 (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.