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U.S.G.S.	
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

I. Operator
D. B. Baxter & Associates
Address
P. O. Box 4171, Midland, Texas 79701
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
**THIS WELL HAS BEEN PLACED IN THE POOR
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.**

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Cities Service-Federal	Well No. 1	Pool Name, including Formation Undesignated Pennsylvanian	Kind of Lease State, Federal or Fee Federal	Lease No. NM-2958
Location Unit Letter 0 ; 554 Feet From The South Line and 2086 Feet From The East Line of Section 21 Township 8-S Range 36-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"/> Mobil Oil Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 600, Dallas, Texas 75221					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 300, Tulsa, Oklahoma					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 21	Twp. 8-S	Rge. 36-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)	<input checked="" type="checkbox"/> Oil Well	<input type="checkbox"/> Gas Well	<input checked="" type="checkbox"/> New Well	<input type="checkbox"/> Workover	<input type="checkbox"/> Deepen	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Same Res't.	<input type="checkbox"/> Diff. Res't.
Date Spudded 9/21/70	Date Compl. Ready to Prod. 10/21/70		Total Depth 9766'		P.B.T.D. 9748'			
Elevations (DF, RKB, RT, GR, etc.) 4101.4' GR	Name of Producing Formation Pennsylvanian		Top Oil/Gas Pay 9682'		Tubing Depth 9739'			
Perforations 9682-9692'					Depth Casing Shoe 4091'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13"	12-3/4"		422'		350 sacks			
11-1/2"	8-5/8"		4091'		350 sacks			
7-7/8"	5-1/2"		9764'		400 sacks			
	2-3/8"		9739'					

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 10/21/70	Date of Test 12/9/70	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 208	Oil - Bbls. 150	Water - Bbls. 58	Gas - MCF 233.70

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.

R. Busby
(Signature)
Agent
(Title)
December 15, 1970
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY **[Signature]**
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

RECEIVED
JUN 16 1970
OIL CONSERVATION COMM.
HOBBBS, N. L.