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LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/> OIL <input type="checkbox"/> 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-11  
Effective 1-1-65

I.

Operator American Petrofina Co. of Texas	
Address P.O. Box 2990 Midland, Texas 79702	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Horton Federal	Well No. 36	Pool Name, Including Formation Milnesand-San Andres	Kind of Lease State, Federal or Fee	Lease No. NM 0145688
Location				
Unit Letter B	990	Feet From The North	Line and 1581	Feet From The East
Line of Section 30	Township 85	Range 35E	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 Pipeline Company	Address (Give address to which approved copy of this form is to be sent) ATTN: Proration Sec. Box 900 Dallas, Tx. 75221					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Box 1589 Tulsa, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 30	Twp. 85	Rge. 35E	Is gas actually connected? Yes	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'v.	Diff. Res'v.
Date Spudded 10-24-84	Date Compl. Ready to Prod. 11-19-84	Total Depth 4806	P.B.T.D. 4754					
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation San Andres	Top Oil/Gas Pay 4655	Tubing Depth 4745					
Perforations 4655-4688, 4712-4732	Depth Casing Shoe 4806							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACK CEMENT					
12 1/4	8 5/8	442	275					
7 7/8	5 1/2	4806	1375					
5"	2 7/8	4745						

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	Date of Test 12-20-84	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs/	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 27.5	Water - Bbls. 244	Gas - MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

J.C. Chapman  
(Signature)  
Asst. District Drilling & Prod. Mgr.  
(Title)  
December 21, 1984  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN - 8 1985, 19  
BY ORIGINAL SIGNED BY JERRY L. SELLON  
DISTRICT SUPERVISOR  
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.