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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

HOOPER OFFICE O. G. C.
03 PM '66

I.

Operator Champlin Petroleum Company	
Address P. O. Box 1797, Midland, Texas	
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 State "4"	Lease No. NM 5144	Well No. 1	Pool Name, Including Formation Chaveroo-San Andres	Kind of Lease State, Federal or Fee State
Location				
Unit Letter C	660	Feet From The North	Line and 1980	Feet From The West
Line of Section 4	Township 8-S	Range 33-E	, NMPM, Chaves 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 B Sec. 4 Twp. 8-S Rge. 33-E Is gas actually connected? Vented 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 10-26-65	Date Compl. Ready to Prod. 1-9-66	Total Depth 4418'	P.B.T.D. 4290'					
Elevations (DF, RKB, RT, GR, etc.) 4427' GR	Name of Producing Formation San Andres	Top Oil/Gas Pay 4245'	Tubing Depth 4276'					
Perforations 2 holes each @ 4245, 4252, 4261, 4268, & 4273'			Depth Casing Shoe 4418'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
12-1/4"	8-5/8", 20#	351'		200 sacks regular				
7-7/8"	4-1/2", 9.5#	4418'		375 sacks regular				

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 1-8-66	Date of Test 1-9-66	Producing Method (Flow, pump, gas lift, etc.) Swabbing	
Length of Test 24 hrs.	Tubing Pressure --	Casing Pressure --	Choke Size --
Actual Prod. During Test 228 bbls.	Oil-Bbls. 68	Water-Bbls. 160	Gas-MCF N.I.

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.
Form C-102 designating allocated acreage of 40 acres previously submitted with application to drill.

H. N. Brown
H. N. Brown (Signature)
District Superintendent

(Title)

January 11, 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.