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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
Champlin Petroleum Company
Address
P.O. Box 1797, Midland, Texas
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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "6" K-2779 Well No. 4 Pool Name, including Formation Chaveroo-San Andres Kind of Lease R-3/8
Location
Unit Letter L 660 Feet From The West Line and 1900 Feet From The South
Line of Section 6 Township 8-S Range 33-E, NMPM, Chaves 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)
The Permian Corporation P.O. Box 3119, 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 F Sec. 6 Twp. 8-S Rge. 33-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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 6-19-66	Date Compl. Ready to Prod. 7-2-66	Total Depth 4405	P.B.T.D. 4403					
Pool 4453 RKB	Name of Producing Formation San Andres	Top Oil/Gas Pay 4043	Tubing Depth 4351					
Perforations 2-3/8" shots each at 4153, 4157, 4195, 4210, 4265, 4287 1-3/8" shot at 4291, 4294, 4300, 4302, 4305, 4308, 4310, 4314						Depth Casing Shoe 4403		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/2	8-5/8	20#	383		250 - Circulated			
7-7/8	4-1/2	9.5 #	4405		325			

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 8-4-66	Date of Test 8-4-66	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure 14	Casing Pressure 75	Choke Size --
Actual Prod. During Test 130	Oil-Bbls. 14	Water-Bbls. 305	Gas-MCF 3.8

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

B. F. Claer
(Signature)

Engineer

(Title)

August 22, 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 1.11.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only 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.