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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
Eugene E. Nearburg
Address
3303 Lee Parkway, Dallas, Texas 75219
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 **Not Applicable**

II. DESCRIPTION OF WELL AND LEASE
Lease Name **Skinner-Federal** Well No. **2** Pool Name, including Formation **Cato - San Andres** Kind of Lease **Federal** Lease No. **NM-014232**
Location
Unit Letter **B** ; **660** Feet From The **North** Line and **1980** Feet From The **East**
Line of Section **8** Township **8-S** Range **30E** , NMPM, **Chaves** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Mobil Pipe Line Company Address (Give address to which approved copy of this form is to be sent)
PO Box 900 Dallas, Texas 75221 Attn Don Kennedy
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Vented Address (Give address to which approved copy of this form is to be sent)
Not Applicable
If well produces oil or liquids, give location of tanks. Unit **P** Sec. **5** Twp. **8S** Rge. **30E** Is gas actually connected? **No** When **-**

If this production is commingled with that from any other lease or pool, give commingling order number: **Not Applicable**

IV. COMPLETION DATA
Designate Type of Completion - (X) ☒ Oil Well ☒ Gas Well ☒ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☐
Date Spudded **10-30-67** Date Compl. Ready to Prod. **11-15-67** Total Depth **3550'** P.B.T.D. **3510'**
Elevations (DF, RKB, RT, GR, etc.) **4030 RKB** Name of Producing Formation **San Andres** Top Oil/Gas Pay **3222** Tubing Depth **3306**
Perforations **3226 - 3234 - 3261 - 3266 - 3290** Depth Casing Shoe **3549**
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12 1/4" **8 5/8"** **313** **250**
7 7/8" **4 1/2"** **3549** **275**
2 3/8" OD **3306**

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)

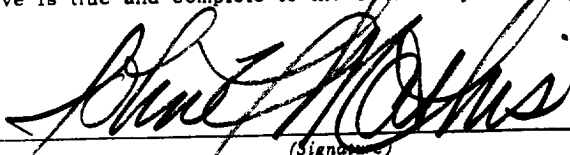
Date First New Oil Run To Tanks 11-15-67	Date of Test 11-17-67	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 70#	Casing Pressure 600#	Choke Size 20/64"
Actual Prod. During Test 76	Oil-Bbls. 75	Water-Bbls. 1	Gas-MCF 105

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


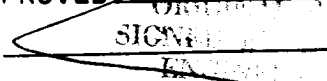
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)

Office Manager
(Title)

11-21-67
(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.

