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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

RECEIVED

JUN 14 1978

Operator Flag-Redfern Oil Company		O. C. C. ARTESIA, OFFICE
Address P.O. Box 23 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) <b>CASINGHEAD GAS MUST NOT BE FLARED AFTER 8-4-78 UNLESS AN EXCEPTION TO R-4076 IS OBTAINED.</b>

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Amoco-Federal	Well No. 3	Pool Name, Including Formation Tom-Tom San Andres	Kind of Lease State, Federal or Fee federal	Lease No.
Location Unit Letter M ; 660 Feet From The West Line and 660 Feet From The South Line of Section 26 Township 7-S Range 31-E , NMPM, Chaves County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Oil Corp.	Address (Give address to which approved copy of this form is to be sent) Box 3119 Midland, TX 79702					
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 M	Sec. 26	Twp. 7-S	Rge. R-31E	Is gas actually connected? NO	When

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 5-15-78	Date Compl. Ready to Prod. 6-8-78		Total Depth 4100'		P.B.T.D. 4085'			
Elevations (DF, RKB, RT, GR, etc.) 4364 GL	Name of Producing Formation San Andres		Top Oil/Gas Pay 3966		Tubing Depth 4006			
Perforations 3966, 67, 68, 72, 73, 74, 87, 88, 89, 93, 94, 95, 4001, 4002 & 4003					Depth Casing Shoe 4100'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		1606		550 sx. H. Lite, 200sx.C			
7-7/8"	4-1/2"		4100		250 sx. Pozmix			
	2-3/8"		4006					

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 6-4-78	Date of Test 6-8-78	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. 79	Water-Bbls. 1	Gas-MCF 27

GAS WELL

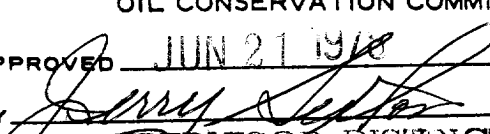
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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)  
Petroleum Engineer  
(Title)  
June 8, 1978  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 21 1978, 19  
BY   
TITLE SUPERVISOR DISTRICT I

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.