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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION 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

Operator MORANCO	
Address P. O. Box 1860, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	
New Well ☒	Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐
Recompletion ☐	
Change in Ownership ☐	

If change of ownership give name and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
OF THE **WESTERN RESERVES 32 ST.** POOL
AND THEREFORE THIS FORM DOES NOT CONCUR
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE			
Lease Name Western Reserves 32 St.	Well No. Pool Name, including Formation 2 Tom-Tom	Kind of Lease State, Federal or Fee State	Lease No. L-5119
Location Unit Letter I ; 1980 Feet From The South Line and 330 Feet From The East Line of Section 32 Township 7S Range 31E , N.M.P.M., Chaves County			

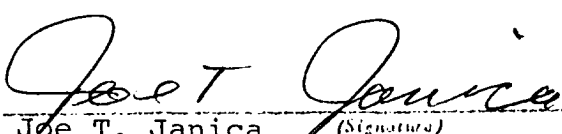
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, Texas 77001		
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)		
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 32	Twp. 7S
			Rge. 31E
	Is gas actually connected?		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 ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Stave Rest'n ☐ Full Repair ☐		
Date Spudded 12-6-78	Date Compl. Ready to Prod. 12-20-78	Total Depth 4006'	P.D.T.D. 3964'
Elevations (D.F., RKB, RT, GR, etc.) 4283 RT	Name of Producing Formation San Andres	Top Oil/Gas Pay 3780'	Tubing Depth 3900'
Perforations 3780-92 (3 shots) 3784-86 (3 shots) 3791-97 (7 shots) 3808 (1 shot) 3813-15 (3 shots) 3827-29 (3 shots) 3833-35 (3 shots) 3840-48 (9 shots) 3852-54 (3 shots)			Depth Casing Shoe
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT			
11"	8 5/8 - 2 3/8	1364	700 sacks
7 7/8	4 1/2	4006	300 sacks

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead 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 12-18-78	Date of Test 12-20-78	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 50#	Casing Pressure 0	Choke Size 1/2"
Actual Prod. During Test 108 bbls	Oil - bbls. 108	Water - bbls. --	Gas - MCF T.S.T.M.

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	bbls. Condensate/MCF	Gravity of Condensate
Testing Method (flow, 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.	
 Joe T. Janica (Signature) Agent	
12-21-78 (Date)	

OIL CONSERVATION COMMISSION	
DEC 26 1978	
APPROVED _____, 19	Orig. Signed By _____ Les Clements Oil Conservation
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 available 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.	