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| SANTA FE | | |
| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| IRANSPORTER | OIL G AS | |
| OPETATOR | | |
| PROPATION OF | | |
| Flag-Redfe | l Comp | |
| P O. Box | 23 1 | Midlan |
| December 10 Visit Cities | Checke | woner hav |

| | DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL | NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL G | | | Form C-104 Supersedes Old C-104 and C-116 Effective 1-1-65 GAS | | |
|--|--|---|---|--|--|--|--|
| | OPER/TOR | | | | | | |
| ı. | PROPATION OFFICE Operator | | | | · | | |
| Flag-Redfern Oil Company Address P O. Box 23 Midland, Texas 79702 Reason(s) for filing (Check proper box) Other (Please explain) | | | | | | | |
| | | | | | | | |
| | New Well X | [X] Change in Transporter of: | | | TARED AFTER 5/9/19 | | |
| | Change in Ownership | CII Casinghead Gas | Ondensate Condensate | | CEPTION TO R-4070 | | |
| | If change of ownership give name and address of previous owner | | | | | | |
| i. | DESCRIPTION OF WELL AND L | EASE. | luding Formation | Kind of Lea | nse Lease No. | | |
| | Southard "26" | 3 Tom-Tom | (San Andres) | State, Fede | eral or Fee Fee | | |
| Unit Letter F; 1980 Feet From The North Line and 1980 Feet From The West | | | | | | | |
| | Line of Section 26 Town | nship 7-S Ro | nge 31-E | , NMPM, | Chaves County | | |
| II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil or Condensate | | | | | roved copy of this form is to be sent) | | |
| | Basin, Inc. Name of Authorized Transporter of Cast | nghead Gas or Dry Gas | P. 0. | | land, Texas 79702 | | |
| | None | nghadd Gas or Dry Gas | Address (i) | tee duaress to which upp | roved copy of this form is to be semy | | |
| | If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. D 26 7 | Pige. Is gas actu | rally connected? | When | | |
| v. | If this production is commingled with COMPLETION DATA | n that from any other lease | or pool, give commi | ngling order number: | | | |
| | Designate Type of Completion | n - (X) | s Well New Well | Workover Deepen | Plug Back Same Resty. Diff, Resty. | | |
| | Date Spudned | Date Compl. Ready to Prod. | Total Dept | h | P.B.T.D. | | |
| | 2-18-79 Elevations (DF, RAB, RT, GR, etc.) | 2-26-79 Name of Producing Formation | 4100' Top Oil/Go | is Pay | 4067 Tubing Depth | | |
| | 4372 GR | San Andres | 3961 | | 4006 | | |
| | Perforations 3961 - 4031' | | | | Depth Casing Shoe 4098 | | |
| | TUBING, CASING, AND | | | | | | |
| | 12-1/4" | 8-5/8" | 1698 | DEPTH SET | SACKS CEMENT | | |
| | 7-7/8" | 4-1/2" | 4098 | | 250 sx | | |
| | | | | | | | |
| v. | TEST DATA AND REQUEST FO | | or this depth or be for | full 24 hours) | oil and must be equal to or exceed top allow- | | |
| | Date First New Oil Run To Tanks 3-9-79 | Date of Test | Producing Pumping | Method (Flow, pump, gas | lift, etc.) | | |
| | Length of Test | 3-14-79 Tubing Pressure | Casing Pre | | Choke Size | | |
| | 24 hrs. Actual Pred. During Test | OII - Bble. | Mater-Bble | | Gas-MCF | | |
| | | 136 | | 4 | 26 | | |
| | GAS WELL | | | | | | |
| | Actual Frod. Test-MCF/D | Length of Test | Bble. Cond | lensate/MMCF | Gravity of Condensate | | |
| | Testing Method (pitot, back pr.) | Tubing Preseure (Shut-in) | Casing Pre | ssuro (Shut-in) | Cheke Size | | |
| ı. | CERTIFICATE OF COMPLIANC | tp ∮ood v t | | / MAR 9 | VATION COMMISSION | | |
| | I hereby certify that the rules under Commission have been complied wi | | | VEO MIMIL Z | , 19 | | |
| above is true and complete to the heat of my knowledge and belief. | | | BY SUPERVISOR DISTRIC | | | | |
| Jelly Lendi (Signatu e) | | | TITLE/ | | | | |
| | | | ربير أأ | This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despendentially 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 sud recompleted wells. | | | |
| | | | li well thi | | | | |
| Engineer (Title) | | AII | | | | | |
| 3-15-79 (Pote) | | well nam | 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 | | | | |
| | | | | Separate forms Color must be into the sacre post in more, | | | |

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MAR 1 9 1979
OIL CONSERVATION COMM.