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| FILE                   |            |
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| LAND OFFICE            |            |
| TRANSPORTER            | OIL<br>GAS |
| OPERATOR               |            |
| PROBATION 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-111  
Effective 1-1-65

I. OPERATOR

Operator **El Ran, Inc.**

Address **1603 Broadway, Lubbock, Texas 79401**

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)  
**CASINGHEAD GAS MUST NOT BE  
OBTAINED AFTER 12/24/79  
UNLESS AN EXCEPTION TO R-4670  
IS OBTAINED**

If change of ownership give name and address of previous owner **THIS WELL HAS BEEN PLACED IN THE PUBLIC DOMAIN BY THE COMMISSION**

II. DESCRIPTION OF WELL AND LEASE

Lease Name **Carroll** Well No. **1** Pool Name, including Formation **Chavero (SA) R-6211** Kind of Lease **Fee** Lease No. **---**

Location

Unit Letter **J** : **2200** Feet From The **S** Line and **2200** Feet From The **E** Line of Section **3** Township **8-S** Range **32-E** , NMPM, **Chaves** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ **Phillips Petroleum** Address (Give address to which approved copy of this form is to be sent) **P. O. Box 791, Midland, Texas 79701**

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ **Cities Service** Address (Give address to which approved copy of this form is to be sent) **P. O. Box 300, Tulsa, Oklahoma 74102**

If well produces oil or liquids, give location of tanks. Unit **J** Sec. **3** Twp. **8-S** Rge. **32-E** Is gas actually connected? **NO** When **---**

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

IV. COMPLETION DATA

Designate Type of Completion - (X) Oil Well ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Hole ☐ P.H. No. ☐

Date Spudded **10/12/79** Date Compl. Ready to Prod. **10/24/79** Total Depth **4316** P.B.T.D. **4314**

Elevations (D.F., RKB, RT, GR, etc.) **4474 GR** Name of Producing Formation **SA** Top Oil/Gas Pay **4247** Testing Depth **4240**

Perforations **4247 - 4278** Depth Casing Shoe **4315**

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE      | CASING & TUBING SIZE | DEPTH SET   | SACKS CEMENT |
|----------------|----------------------|-------------|--------------|
| <b>12-3/4"</b> | <b>8-5/8"</b>        | <b>1693</b> | <b>550</b>   |
| <b>7-7/8"</b>  | <b>4-1/2"</b>        | <b>4315</b> | <b>175</b>   |
|                | <b>2-3/8"</b>        | <b>4240</b> |              |

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 **10/24/79** Date of Test **10/24/79** Producing Method (Flow, pump, gas lift, etc.) **Flow**

Length of Test **24** Tubing Pressure **120** Casing Pressure **360** Choke Size **1/2"**

Actual Prod. During Test **83** Oil - Bbls. **83** Water - Bbls. **0** Gas - MCF **76**

GAS WELL

Actual Prod. Test - MCF/D **---** Length of Test **---** Bbls. Condensate/MCF **---** Gravity of Condensate **---**

Testing Method (flow, back prod.) **---** 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.

**W. W. Lane** (Signature)  
**President** (Title)  
**October 26, 1979** (Date)

OIL CONSERVATION COMMISSION  
**OCT 29 1979**  
APPROVED BY **[Signature]**  
TITLE **SUPERVISOR DISTRICT**

This form is to be filed in compliance with RULE 1104.  
If this be a request for allowable for a newly drilled or deepened well, this form must be accompanied by a calculation of the oil or gas taken on the well in accordance with section 111.  
All portions of this form must be filled out completely for information and record.  
Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter, or other such change of condition.