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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 MWJ Producing Company	
Address 1804 First National Bank Bldg. Midland, Texas 79701	
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)	

If change of ownership give name
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Chaveroo State	Well No. 8	Pool Name, Including Formation Chaveroo San Andres R-6758	Kind of Lease State, Federal or Fee State	Lease No. LG=1774
Location				
Unit Letter M ; 990 Feet From The South Line and 330 Feet From The West				
Line of Section 2 Township 8S Range 32E , NMPM, Chaves County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation Permian (Eiffel)	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 <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Transwestern Pipeline Company	Address (Give address to which approved copy of this form is to be sent) Box 2521 Houston, Texas 77001			
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 2	Twp. 8S	Rge. 32E
Is gas actually connected?		When		
Yes		7/20/81		

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 4/2/81	Date Compl. Ready to Prod. 7/23/81		Total Depth 4330'		P.B.T.D. 4322'			
Elevations (DF, RKB, RT, GR, etc.) 4479' Gr.	Name of Producing Formation San Andres		Top Oil/Gas Pay 4202'		Tubing Depth 4219'			
Perforations 4202-4318'					Depth Casing Shoe 4330'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8 5/8"		1785'		625 sacks			
7 7/8"	4 1/2"		4330'		325 sacks			
	2 3/8"		4219'		None			

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 7/23/81	Date of Test 7/23/81	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 86	Oil-Bbls. 31	Water-Bbls. 55	Gas-MCF 41

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.

R. B. [Signature]
(Signature)
Agent
(Title)
7/24/81
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 27 1981, 19
BY [Signature]
TITLE OPERATOR DISTRICT 1

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.