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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

82 11 68

I. Operator
Western States Producing Company
Address
900 Bank of the Southwest Midland, Texas 79701
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)
Re-Entry of Abandoned Well
If change of ownership give name and address of previous owner --

II. DESCRIPTION OF WELL AND LEASE
Lease Name Smelting State Lease No. OG 6171 Well No. 1 Pool Name, including Formation East Baylex-Pennsylvanian-Wildcat R-3530 Kind of Lease State, Federal or Fee State
Location
Unit Letter F 1980 Feet From The North Line and 1980 Feet From The West
Line of Section 9 Township 12-S Range 34-E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Permian Corporation P. O. Box 3119 Midland, Texas 79701
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 F Sec. 9 Twp. 12-S Rge. 34-E Is gas actually connected? No When contract finalized

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 Same Res'v. Diff. Res'v.
X Re-Entry of Abandoned Well
Date Spudded 7-2-68 Date Compl. Ready to Prod. 8-7-68 Total Depth 13,150 P.B.T.D. 10,050
Elevations (DF, RKB, RT, GR, etc.) 4179 G.L. Name of Producing Formation Bough "C" Top Oil/Gas Pay 9998 Tubing Depth 9990
Perforations 9998 to 10,010 Depth Casing Shoe 10,366
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17 1/2 13 3/8 330 325
12 1/2 9 5/8 4199 1450
7 7/8 5 1/2 10366 400
2 3/8 9990

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 8-8-68 Date of Test 8-12-68 Producing Method (Flow, pump, gas lift, etc.) Pump 4" Hydraulic
Length of Test 24 hours Tubing Pressure 2900 Casing Pressure 250 Choke Size --
Actual Prod. During Test 130 Oil-Bbls. 130 Water-Bbls. 325 Gas-MCF 182

GAS WELL
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate
Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure 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.
F. P. Duckler (Signature)
9/29/68 (Date)
OIL CONSERVATION COMMISSION
APPROVED 19
BY Leslie A. Clements
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 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.