

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

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

I. Operator
CABOT CORPORATION

Address
P. O. Box 1101 Pampa, Texas 79065

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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

R-5987

Lease Name J. L. Reed	Well No. 1	Pool Name, Including Formation King (Mississippian)	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter H ; 1930 Feet From The North Line and 660 Feet From The East Line of Section 35 Township 13S Range 37E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Amoco Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) 3300 Continental National Bank Bldg. Ft. Worth, Texas					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Warren Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1560 Tulsa, Oklahoma 74102					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 35	Twp. 13S	Rge. 37E	Is gas actually connected? Yes	When October 10, 1978

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 Rest'v.	Diff. Rest'v.
		X				X		X
Date Spudded April 14, 1956	Date Compl. Ready to Prod. August 14, 1956		Total Depth 12,670 (Dev.)		P.B.T.D. 11,600 (Miss.)			
Elevations (DF, RKB, RT, GR, etc.) 3856 DF	Name of Producing Formation Mississippian		Top Oil/Gas Pay 11,421		Tubing Depth 10,568			
Perforations 11,421-427; 11,433-441; 11,451-471					Depth Casing Shoe 12,590			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
7 1/2	13 3/8	48#	334		400			
11	8 5/8	24-32#	4577		2400			
7 7/8	5 1/2	17-20-23#	12590		700			
	2 1/2		10568					

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 198	Length of Test 24 Hr.	Bbls. Condensate/MMCF 6	Gravity of Condensate 62° API
Testing Method (pitot, back pr.) Meter	Tubing Pressure (shut-in) 1800	Casing Pressure (shut-in) Packer	Choke Size 8/64"

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.

Robert N. Johnson (Signature)
Agent

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
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.