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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION 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-11
Effective 1-1-65

I. Operator
Natomas North America, Inc.
Address
1 West Third Street, Suite 900 - Tulsa, Oklahoma 74103
Reason(s) for filing (Check proper box)
New Well: ☐ Change in Transporter of: Oil ☒ Dry Gas ☐
Recompletion: ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership: ☐ Other (Please explain)

If change in ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name High Plains	Well No. 1	Pool Name, Including Formation High Plains Penn	Kind of Lease State, Federal or Fee	State	Lease No. E9697
Location Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line Section 22 Township 14S Range 34E, NMPM, Lea 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"/> Charter Crude Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 5008, Houston, Texas 77012				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Western Petroleum Tipperary Resources	Address (Give address to which approved copy of this form is to be sent) Box 1584, Tulsa, Oklahoma 74102 P.O. Box 3179, Midland, Texas 79702				
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 15	Twp. 14S	Rge. 34E	is gas actually connected? When

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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE (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	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.

(Signature)
Operations Administrator 11-05-82
(Title)

OIL CONSERVATION COMMISSION

APPROVED NOV 5 1982, 19
BY
OIL & GAS INSPECTOR
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 allow-

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NOV 12 1982

C. C. B.
RECORDS OFFICE