DISTRIBUTION SANTA FE

IEW MEXICO OIL CONSERVATION COMMISSI

Form C-104

	10tm C=104
REQUEST FOR ALLOWABLE	Supersedes Old C-104 and C-
AND	Effective 1-1-65
HORIZATION TO TRANSPORT OIL AND NATURAL GAS	

Separate Forms C-104 must be filed for each pool in multiply completed wells.

υ.:	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
LA	LAND OFFICE						
	RANSPORTER GAS						
<u> </u>	PERATOR OFFICE						
I	erator						
	Midwest Oil Corporation						
Add	iress						
	1500 Wilco Bldg., Midland, Texas 79701						
Rec	ison(s) for filing (Check proper		Other (Please exp	plain)			
Net	w Well	Change in Transporter of:	Sqs. Up	per Zone			
Red	completion X	Oil Dry G	as Recompl	eted in Lower			
Che	inge in Ownership	Casinghead Gas Conde	ensate				
<u> </u>							
	hange of ownership give nam address of previous owner_	e					
e nd	address of previous owner _						
II. DE	SCRIPTION OF WELL AN	ND LEASE					
	ase Name	Well No. Pool Name, Including		nd of Lease	Lease No.		
<u> </u>	State "C"	1 Nonombre Los	er Penn Sto	ite, Federal or Fee State	K-1038		
Lo	cation	_					
	Unit Letter;	1980 Feet From The South L	ine and F	eet From The West			
1		10.0	64 -	*	i		
	Line of Section 32	Township 13-8 Range	34-E , NMPM,	Lea	County		
II. <u>de</u>	SIGNATION OF TRANSPO	or Condensate	As	hich approved copy of this form is	s to be sent)		
Nα	me of Authorized Transporter of		1		_ 1		
L_	AMOCO Pipeline (me of Authorized Transporter of	Casinghead Gas a or Dry Gas		ve., Lubbock, Texas hich approved copy of this form i.			
Na	Tipperary Resour			Midland, Texas 79	·		
	Tipperary Reson	Unit Sec. Twp. P.ge.	Is gas actually connected?	When	· •		
	well produces oil or liquids,		Yes	7-15-1965			
L	e location of tanks.						
	nis production is commingled MPLETION DATA	with that from any other lease or pool	, give commingling order nu	mber:			
		Oil Well Gas Well	New Well Workover	Deepen Plug Back Same R	les'v. Diff. Res'v.		
	Designate Type of Compl	etion – (A)	X	1 1	<u> </u>		
Dα	te Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
		5-12-71	10,987	10,	845		
Ele	vations (DF, RKB, RT, GR, etc.) Name of Producing Formation		Top Oil/Gas Pay Tubing Depth				
	3168 KB Lower Penn		10,694 10,652 Depth Casing Shoe		652		
Pe	10,694 - 10,719						
			ID APPLICATION OF CARD				
			ID CEMENTING RECORD	SACKS	EMENT		
<u> </u>	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS C			
	17 1/2	13 3/8	322	30			
	11 7 7/8	8 5/8	4297 10,986	30 50			
		3 1/2	10,652		<u> </u>		
L							
	EST 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)						
OII. WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)							
5-12-71 5-25-71 Pump		Priman					
1.0	ngth of Test	Tubing Pressure	Casing Pressure	Choke Size			
-	24 hrs.						
Ac	tual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF			
	834 bbls.	90	744	20	<u> </u>		
'							
GA	AS WELL			· · · · · · · · · · · · · · · · · · ·			
	tual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condense	rt●		
Te	esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in	Choke Size			
VI. CE	RTIFICATE OF COMPLI	ANCE	OIL CO	NSERVATION COMMISSI	ON		
			MA	14 27 1971	10		
Ιh	ereby certify that the rules a	and regulations of the Oil Conservation	1 AFFROVED	APPROVED A A A A A A A A A A A A A A A A A A A			
C	ission have been compli	ed with and that the information give:		ex Lesle & Clements			
above is true and complete to the best of my knowledge and belief.		Off & G	Off & Gas hapade				
			TITLE	TITLE			
	,		This form is to be	filed in compliance with RU	LE 1104.		
ar clyn Surver (Signature)			TS abin in a secure	t for allowable for a newly dr	illed or deepened		
			ments while form must be	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
	Production Clerk		All sections of this form must be filled out completely for allow-				
	(Title)		able on new and recompleted wells.				
	5-25-71	· ·	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.				
	<u> </u>	(Date)	well name or number, o	r transporter, or other such Chi	mige or condition		

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the said and A file

RECEIVED

MAY 2 5 1971

OIL CONSERVATION COMM. HOBBS, N.TM.