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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

PM '66

Operator Corinne Grace	
Address 1118 Fidelity Union Tower, Dallas 1, Texas	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter oil
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"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ranger Lake	Well No. 1	Pool Name, Including Formation Ranger Lake - Pennsylvanian Ranger Lake (Penn)	Kind of Lease State, Federal, XXXXXXX
Location Unit Letter N, 1980 Feet From The West Line and 660 Feet From The South			
Line of Section 11, Township 12-S, Range 34-E, NMCM, 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"/> Western Oil Transportation Corporation Trucks	Address (Give address to which approved copy of this form is to be sent) Pan American Petroleum Corporation P.O. Box 1725, Midland, Texas, Attn: J.E. Leascher		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Gas currently being vented	Address (Give address to which approved copy of this form is to be sent) Not applicable		
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 11	Twp. 12-S
			Rge. 34-E
	Is gas actually connected?		When
	No		Unknown

If this production is commingled with that from any other lease or pool, give commingling order number: Not Applicable

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 9-10-66	Date Compl. Ready to Prod. 10-26-66		Total Depth 10,407'		P.B.T.D. 10,406'			
Pool Ranger Lake	Name of Producing Formation Bough B		Top Oil/Gas Day 9,934'		Tubing Depth 9,885'			
Perforations 9934', 9937', 9957', 9960', 9962', 9964½', 9974', 9976', 9985', 9987', 9991', 9994½', 9996½', with 2 JSPE						Depth Casing Shoe 10,406'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
15" - 0 - 371 ft		11-3/4", 42#, H-40		371 feet		300 sks Regular		
11" - 371- 4178 ft		8-5/8", 24 & 32#, J-55		4178 feet		400 sks Incor & Regular		
7-7/8" -4178- 10407 ft		4-1/2", 11.6#, J-55 & N-80		10406 feet		400 sks Incor Pozmix		
4-1/2" casing -0-9885'		2-3/8", 4.7#, J-55 EUE		9885 feet				

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 10-26-66	Date of Test 10-26 to 10-27-66	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 285	Casing Pressure Packer	Choke Size 24/64"
Actual Prod. During Test 380 barrels	Oil - Bbls. 352	Water - Bbls. 28	Gas - MCF 420 (vented)

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.

Ralph H. Viney

(Signature)

Consultant

(Title)

October 29, 1966

(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 tubulation 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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.