

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
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

I. Operator
SOUTHWEST PRODUCTION CORPORATION
Address
P. O. BOX 936, ROSWELL, NEW MEXICO 88201
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

Lease Name **HARMON** Well No. **1** Pool Name, Including Formation **Undesignated Penn** Kind of Lease **Fee** Lease No.
Location
Unit Letter **330** Feet From The **South** Line and **990** Feet From The **West**
Line of Section **5** Township **14S** Range **37E**, NMPM, **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
Pan American Petroleum Corp. Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1725, Midland, Texas
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
not connected 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 **5** Sec. **14S** Twp. **37E** Is gas actually connected? **no** When **ending**

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'ty.	Diff. Res'ty.
xx								
Date Spudded 12-28-67	Date Compl. Ready to Prod. 2-23-68		Total Depth 11,810		P.B.T.D. 11,775			
Elevations (DF, RKB, RT, GR, etc.) 3894.5 KB	Name of Producing Formation Penn		Top Oil/Gas Pay 11,399		Tubing Depth 11,428			
Perforations 11,399 - 11,681				Depth Casing Shoe 11,809				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13"	11-3/4	385	230 sks
11"	8-5/8	4673	430 sks
7-7/8"	5-1/2	11809	835 sks
---	2-3/8	11428	-----

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 2-27-68	Date of Test 2-28-68	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs.	Tubing Pressure 75	Casing Pressure Packer	Choke Size 3/4"
Actual Prod. During Test 240 BO	Oil - Bbls. 240	Water - Bbls. 21 (Load)	Gas - MCF NR

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.

Conrad F. Appladorn (Signature)
Production Manager (Title)
March 22, 1968 (Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY **John A. Kenezy**
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.