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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
Samedan Oil Corporation
Address
2207 Wilco Building, Midland, Texas 79701
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)
**CASINGHEAD GAS MUST NOT BE
FLAMED AFTER 3/19/71
UNLESS AN EXCEPTION TO 8-370
IS OBTAINED.**

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Carter	Well No. 1	Pool Name, Including Formation Undesignated East Morton (wolfcamp)	Kind of Lease State, Federal or Fee Fee
Location: Unit Letter 0 , 510 Feet From The South Line and 1830 Feet From The East Line of Section 33 , Township 14-S Range 32-E , 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"/> Admiral Crude Oil Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1725, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Negotiating Gas Contract	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 0	Sec. 33	Twp. 14-S	Rge. 35-E	Is gas actually connected? No	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 <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 11-14-70	Date Compl. Ready to Prod. 1-19-71		Total Depth 10,840'		P.B.T.D. 10,763'			
Pool 4010.2' G.I.	Name of Producing Formation Permo-Penn		Top Oil/Gas Pay 10,540'		Tubing Depth 10,470'			
Perforations (4 shots) 10,540' to 10,544'					Depth Casing Shoe 10,824'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/8"	13-3/8"		464'		350 SX.			
11"	8-5/8"		4,877		500 SX.			
7-5/8"	5-1/2"		10,824'		750 SX.			
5-1/2"	2-7/8"		10,470'					

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 1-19-71	Date of Test 1-20-71	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 270	Casing Pressure	Choke Size 18/64"
Actual Prod. During Test 463	Oil-Bbls. 389	Water-Bbls. 74	Gas-MCF 8,947

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.


(Signature)

Division Production Superintendent
(Title)

January 21, 1971
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JAN 22 1971**, 19

BY **John W. Rungt**

TITLE **Geologist**

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 Sections I, II, III, and VI only 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.

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JAN 22 1971

OIL CONSERVATION COMM.
HOBBS N. M.