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TRANSPORTER	OIL	
	GAS	
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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

Operator The Superior Oil Company		
Address P. O. Box 1900, Midland, Texas 79701		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
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 State "H"	Well No. 1	Pool Name, including Formation Wildcat-Undesignated	Kind of Lease State, Federal or Fee State	Lease No. K-5449
Location Unit Letter M ; 660 Feet From The South Line and 660 Feet From The West Line of Section 2 Township 14-S Range 34-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"/> Permian Corporation (Trucks)	Address (Give address to which approved copy of this form is to be sent) 1509 W. Wall, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 M	Sec. 2	Twp. 14-S	Rge. 34-E	Is gas actually connected? No	When Unknown at present

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 January 17, 1971	Date Compl. Ready to Prod. April 4, 1971	Total Depth 10,600		P.B.T.D. 10,533					
Elevations (DF, RKB, RT, GR, etc.) RKB: 4,128, GR: 4,108	Name of Producing Formation Upper Penn "A" Zone		Top Oil/Gas Pay 10,496		Tubing Depth 10,524				
Perforations 10,500 - 10,506 & 10,517 - 10,519				Depth Casing Shoe 10,600					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
15"	11-3/4"		400'		520 sacks circulated				
11"	8-5/8"		4,500'		775 sacks-top cmt @ 2050				
7-7/8"	5-1/2"		10,600'		200 sacks-top cmt @ 9650				
	2-3/8" & 2-7/8"		10,524'						

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)

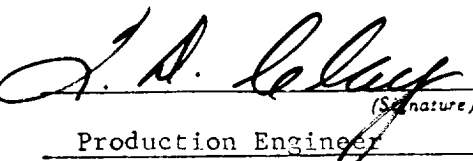
Date First New Oil Run To Tanks 3-5-71	Date of Test 4-8-71	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure 50	Casing Pressure 25	Choke Size ---
Actual Prod. During Test 96	Oil-Bbls. 77	Water-Bbls. 19	Gas-MCF 19

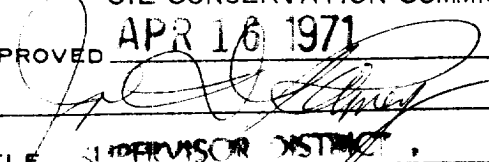
GAS WELL

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.


T. D. Clay
Production Engineer
April 12, 1971

OIL CONSERVATION COMMISSION
APPROVED APR 16 1971
BY 
TITLE SUPERVISOR DISTRICT

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.

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APR 1 1971
OIL CONSERVATION COMM.
HOBBS, N. M.