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NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Revised 1-1-60

Operator J. M. Huber Corporation	
Address 1900 Wilco Building, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Form C-104 filed to indicate Authorized Transporter of Casinghead Gas.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <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 Griffin	Well No. 1	Pool Name, Including Formation Wildcat Bough "A"	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter A ; 660 Feet From The North Line and 660 Feet From The East				
Line of Section 4 Township 14S Range 36E, 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"/>	Address (Give address to which approved copy of this form is to be sent)					
The Permian Corporation	1509 West Wall, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Southern Union Gas Company	1507 Pacific Ave., Dallas, Texas 75201					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 4	Twp. 14S	Rge. 36E	Is gas actually connected? Yes	When 11-15-71

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 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 5/26/71	Date Compl. Ready to Prod. 7/23/71		Total Depth 11,475'		P.B.T.D. 10,425'			
Elevations (DF, RKB, RT, GR, etc.) 3947.6' GR	Name of Producing Formation Bough "A"		Top Oil/Gas Pay 10,203'		Tubing Depth 10,177'			
Perforations 10,203' - 10,210'					Depth Casing Shoe 10,700'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13-3/8"		423'		350			
12 1/4"	9-5/8"		4575'		450			
8-3/4"	5-1/2"		10,700'		340			
	2-3/8"		10,177'					

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 7/20/71	Date of Test 7/28/71	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 12 Hours	Tubing Pressure 350 psi	Casing Pressure Packer	Choke Size 24/64"
Actual Prod. During Test	Oil-Bbls. 179	Water-Bbls. None	Gas-MCF 290

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.

James R. Sutherland
James R. Sutherland (Signature)
District Production Manager
(Title)

February 12, 1975

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY _____ Joe D. _____
District Manager

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.

