

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

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

Operator Anderson Oil & Gas Company, Inc.	
Address 250 Mid-America Building, Midland, Texas 79701	
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> 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"/>
Other CASINGHEAD GAS MUST NOT BE FLARED AFTER <u>11/15/72</u> UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.	

If change of ownership give name and address of previous owner _____
THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED _____ IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

Lease Name Federal "10"	Well No. 1	Pool Name, Including Formation North Bagley Penn.	Kind of Lease State, Federal or Fee Federal	Lease No. LC 060381
Location Unit Letter F ; 1980 Feet From The North Line and 1830 Feet From The West Line of Section 10 Township 12-S Range 13E , NMPM, Lee County				

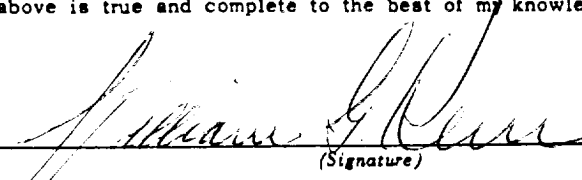
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Amoco Production Trucks		Address (Give address to which approved copy of this form is to be sent) P. O. Box 3112, Midland, Texas 79701		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corporation		Address (Give address to which approved copy of this form is to be sent) P. O. Box 1580, Tulsa Oklahoma 74102		
If well produces oil or liquids, give location of tanks. F 10 12-S 33-E	Unit F	Sec. 10	Twp. 12-S	Rge. 33-E
Is gas actually connected? No		When As soon as possible		

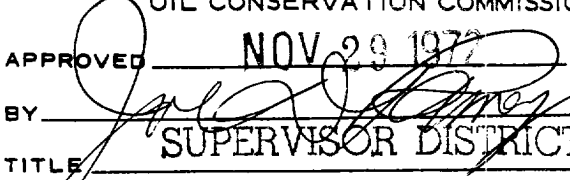
If this production is commingled with that from any other lease or pool, give commingling order number: _____

Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 10-11-72	Date Compl. Ready to Prod. 11-14-72	Total Depth 9700'		P.B.T.D. 9641'					
Elevations (DF, RKB, RT, GR, etc.) 4247 BL	Name of Producing Formation Lower Penn	Top Oil/Gas Pay 9322		Tubing Depth 9248					
Perforations 9356 to 9554 w/18, 0.45" holes		Depth Casing Shoe 9700							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17 1/2"	12 3/4"		400'		400 sk				
11 "	8 5/8"		3800'		300 sk				
7 7/8"	5 1/2"		9700'		425 sk				
	2 7/8"		9248'		None				

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 11-15-72	Date of Test 11-20-72	Producing Method (Flow, pump, gas lift, etc.) 2 1/2" Armo Free Style VFB Pump	
Length of Test 24 hours	Tubing Pressure Hyd Pmp 1600#	Casing Pressure Hyd Pmp 75#	Choke Size None
Actual Prod. During Test 236 Bbls fluid	Oil - Bbls. 140 BO	Water - Bbls. 96 BW	Gas - MCF 175

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

I. 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) Engineer (Title) 11-22-72 (Date)	

OIL CONSERVATION COMMISSION	
APPROVED	NOV 29 1972
BY	 SUPERVISOR DISTRICT I
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.	

RECEIVED

1. 27 1972
OIL CONSERVATION COMM.
HOBBES, N. M.