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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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-11
Effective 1-1-65

I. Operator
Adobe Oil & Gas Corporation
Address
1100 Western United Life Building, Midland, TX 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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE *Saunders Morrow Gas R-6449*

Lease Name Gray "35"	Well No. 1	Pool Name, including Formation Wildcat	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>N</u> ; <u>1650</u> Feet From The <u>West</u> Line and <u>660</u> Feet From The <u>South</u> Line of Section <u>35</u> Township <u>14-S</u> Range <u>33-E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3119, Midland, TX 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Warren Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589, Tulsa, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 35	Twp. 14-S	Rge. 33-E	Is gas actually connected? laying line	When est.. 7-1-80

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'v.	Diff. Res'v.
		X	X					
Date Spudded 2-4-80	Date Compl. Ready to Prod. 5-6-80		Total Depth 13,062		P.B.T.D. 12,861			
Elevations (DF, RKB, RT, GR, etc.) 4201 RKB	Name of Producing Formation Morrow		Top Oil/Gas Pay 12,380		Tubing Depth 12,327			
Perforations 12,382-390 17 holes					Depth Casing Shoe 13,062			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8" 48#	389	585 sx Cl C
12 1/4	3 5/8" 24 & 32#	4250	1650 Cl C + Lite-Circ.
7 7/8	5 1/2" 17# & 20# N-80	13062	1600 Cl H T/cmt @7800

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D CAOF=1092 Max rate=1090	Length of Test 5 Hrs.	Bbls. Condensate/MMCF 41.8	Gravity of Condensate 54° @ 60°
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 3820	Casing Pressure (Shut-in) pkr	Choke Size Variable

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.

M. D. Rogers
(Signature)
Vice President
(Title)
June 24, 1980

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

John W. Runyan
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 and recompleted wells.