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| | 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

I. Operator
GREAT WESTERN DRILLING COMPANY

Address
P. O. BOX 1659 MIDLAND TX 79701

Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
re-ENTRY

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name **STATE "13"** Well No. **1** Pool **UNDESIGNATED** Kind of Lease **STATE**
KERNITZ-PENN (ATOKA)
Location
Unit Letter **P** **510** Feet From The **SOUTH** Line and **660** Feet From The **EAST**
Line of Section **13** Township **16-S** Range **33-E** NMPM, **LEA** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒
PERMIAN CORPORATION Address (Give address to which approved copy of this form is to be sent)
BOX 1183, HOUSTON TX 77001
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒
NATURAL GAS PIPELINE CO. OF AMERICA Address (Give address to which approved copy of this form is to be sent)
BOX 283, HOUSTON TX 77001
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When
P 13 16-S 33-E YES 5-7-76

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 | RE - ENTRY | | | | | ATOKA |
| Date Spudded 1956 | Date Compl. Ready to Prod. 11-12-75 | Total Depth 14,797' | P.B.T.D. Cleaned out to 12,474' | | | | | |
| Re-entry 9-18-75 | Name of Producing Formation ATOKA | Top Oil/Gas Pay 12,660' | Tubing Depth 12,552' | | | | | |
| Pool KERNITZ-PENN | Perforations 12,660'-12,686' w/2 JSPP | Depth Casing Shoe 12,800' | | | | | | |

| | | | |
|--------------------------------------|-----------------------------------|----------------|----------------|
| TUBING, CASING, AND CEMENTING RECORD | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 17 1/2" | 13-3/8" 48#/ft. | 339' | 400 sx |
| 12 1/4" | 9-5/8" 36# & 40#/ft. | 4,570' | 3000 sx |
| 8 3/4" | 7" 26# & 29# & 32# | 12,800' | 500 sx |

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 2436 AOP | Length of Test 4 hours | Bbls. Condensate/MMCF 40.46 | Gravity of Condensate 56 |
| Testing Method (pitot, back pr.) BACK PRESSURE | Tubing Pressure Fl. 850-2350 psi | Casing Pressure PACKER | Choke Size 10/64" thru 24/64" |

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.

OIL CONSERVATION COMMISSION

APPROVED _____, 19
BY **Jerry L. Ballard**
TITLE **SUPERVISOR DISTRICT I**

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.

J. L. Ballard
(Signature)

F. L. Ballard, General Superintendent
(Title)

May 7, 1976
(Date)

RECEIVED

MAY 22 1976

CIL CONSERVATION COMM.
HONDS, H. M.