

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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  
V-F Petroleum

Address  
1212 Vaughn Building, Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input checked="" type="checkbox"/>	Oil	<input type="checkbox"/>	Re-entry, drill deeper and change
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	of operator from Humble Oil & Refining
		Dry Gas	<input checked="" type="checkbox"/>	Company
		Condensate	<input checked="" type="checkbox"/>	

If change of ownership give name  
and address of previous owner

IF WELL HAS BEEN PLACED IN THE POOL  
INDICATED BELOW, IF YOU DO NOT CONCUR  
BY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Humble Townsend	Well No. 1	Pool Name, Including Formation Townsend (Atoka-Morrow)	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter L ; 1980 Feet From The South Line and 660 Feet From The West				
Line of Section 9 Township 16-S Range 35-E , NMPM, Lea 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"/>	Address (Give address to which approved copy of this form is to be sent)
Amoco Production Company	P. O. Box 591, Tulsa, Oklahoma 74102
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)
Northern Natural Gas Company	401 Wall Towers West, Midland, Texas 79701
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	L 9 16-S 35-E No

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			X
Date Spudded 9-10-71	Date Compl. Ready to Prod. 10-22-71	Total Depth 11,850	P.B.T.D. 11,845					
Elevations (DF, RKB, RT, GR, etc.) 4023 RKB	Name of Producing Formation Atoka	Top Oil/Gas Pay 11,800'	Tubing Depth 10,050'					
Perforations 11,800 - 11,810'			Depth Casing Shoe 11,845'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13-3/4"	11-3/4"	439.0	375
11	8-5/8	4,700.0	2200
7-7/8"	5-1/2"	10,585.0	940
4-3/4"	4"	11,845.0	100

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

2-3/8" tubing

11,714.0 Depth

on packer

GAS WELL

Actual Prod. Test-MCF/D 2,350 MCF/D	Length of Test 18.5 hrs.	Bbls. Condensate/MMCF 30	Gravity of Condensate 49.6
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 4187	Casing Pressure (shut-in) Packer	Choke Size Various

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 MAR 20 1972, 19  
BY John Runyan  
Geologist  
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.

V. F. Vasicek V. F. Vasicek  
(Signature)  
Co-owner  
(Title)  
January 6, 1972  
(Date)