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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  
Pennzoil United, Inc.  
Address  
P. O. Drawer 1828 - Midland, Texas 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

Lease Name State "20"	Well No. 1	Pool Name, Including Formation Undesignated	Kind of Lease State, Federal or Fee	Lease No. K - 5187
Location Northeast Lexington-Pennsylvanian R-3816				
Unit Letter A	660	Feet From The North	Line and 660	Feet From The East
Line of Section 20	Township 16-S	Range 37-E	NMFM, 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119 - Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1650 - Tulsa, Oklahoma 74101					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 20	Twp. 16-S	Rge. 37-E	Is gas actually connected? No	When Soon

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 10-30-68	Date Compl. Ready to Prod. 1-4-69	Total Depth 11,660	P.B.T.D. 11,623'					
Elevations (DF, RKB, RT, GR, etc.) 3833 RKB	Name of Producing Formation Strawn	Top Oil/Gas Pay	Tubing Depth 11,350'					
Perforations 11 1/2" 2 1/2"			Depth Casing Shoe 11,658'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2"	13 3/8"	377	360					
11"	8 5/8"	4350	550					
7 7/8"	5 1/2"	11658	485					
	2 3/8" EUE	11350						

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 1-5-69	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs	Tubing Pressure 550#	Casing Pressure Pkr	Choke Size 20/64"
Actual Prod. During Test	Oil-Bbls. 436	Water-Bbls. None	Gas-MCF 356

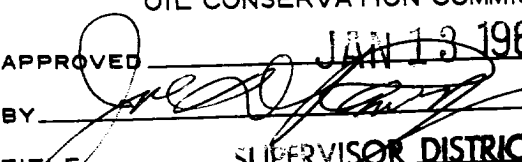
GAS WELL

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.

  
Manager of Production  
1-9-69  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED  JAN 13 1969, 19  
BY  
TITLE SUPERVISOR DISTRICT  
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.