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TRANSPORTER	OIL	
	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
Olen F. Featherstone

Address
239 Petroleum Building, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box) Other (Please explain)

New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Cabot State	Well No. 1	Pool Name, including Formation UNDESIGNATED Permian	Kind of Lease State, Federal or Fee State	Lease No. K 5274
Location Feather-Wolfcamp K-3732				
Unit Letter C	660	Feet From The North	Line and 1980	Feet From The West
Line of Section 29	Township 15 South	Range 32 East	NMPM, 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"/> Valley Gas Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 217, Artesia, New Mexico 88210
If well produces oil or liquids, give location of tanks. C 29 15S 32E	Is gas actually connected? <input type="checkbox"/> When No March 25, 1969 (Est.)

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded December 31, 1968	Date Compl. Ready to Prod. March 5, 1969		Total Depth 10,290 Feet		P.B.T.D. 9,961 Feet			
Elevations (DF, RKB, RT, GR, etc.) 4,337 RKB	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 9,499 Feet		Tubing Depth 9,470 Feet			
Perforations Hyper Jet 2 1/2" One Shot per Interval Lower Zone 9725' - 9726' Oil 9727' - 9728' Oil 9918' - 20' - 22' - Water		Top Zone - 9499' - 9500' - 9501' - Oil		Depth Casing Shoe 9,994 Feet				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17"	12 3/4"		423 Feet		450			
11"	8 5/8"		4,105 Feet		400 (200 with 50-50 pozmix)			
7 7/8"	5 1/2"		9,994 Feet		250 (50-50 pozmix)			
	2 3/8"		9,470 Feet					

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 February 23, 1969	Date of Test February 27, 1969	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 50#	Casing Pressure Packer	Choke Size 28/64"
Actual Prod. During Test 168 Barrels Oil	Oil - Bbls. 168	Water - Bbls. None	Gas - MCF 200 (Est.)

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.

Charles W. Hicks
(Signature)
General Manager
(Title)
March 12 1969
(Date)

OIL CONSERVATION COMMISSION
APPROVED March 17 1969, 19
BY Leslie A. Clements
TITLE Oil & Gas Inspector

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 multiple completed wells.