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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Superseding Old C-101 and C-1
Effective 1-1-65

1. Operator
C & K Petroleum, Inc.

Address
P.O. Drawer 3546, 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) This C-104 being filed to cover sale of gas to Mesa Petroleum for drilling operations August-1975.

If change of ownership give name and address of previous owner

2. DESCRIPTION OF WELL AND LEASE

Lease Name Shipp 27	Well No. 1	Pool Name, including Formation Casey (Strawn)	Kind of Lease State, Federal or Fee	Fee
Location Unit Letter 0 ; 1980 Feet From The East Line and 660 Feet From The South Line of Section 27 Township 16-S Range 37-E, NMPM, Lea County				

3. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Western Crude Oil, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1142, Midland, Tx. 79701			
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Tipperary Corporation	Address (Give address to which approved copy of this form is to be sent) 500 West Illinois, Midland, Texas 79701			
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 27	Twp. 16-S	Rge. 37-E
Is gas actually connected?	When 05-19-75			

If this production is commingled with that from any other lease or pool, give commingling order number:

4. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Restr.	Full Restr.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (D _h , RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

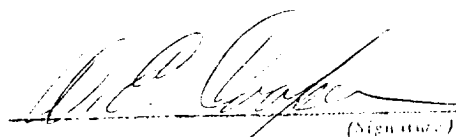
5. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

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	Length of Test
Testing Method (flow, back pr.)	Tubing Pressure (shut-in)
Lbbs. Condensate/MCF	Gravity of Condensate
Casing Pressure (shut-in)	Choke Size

6. 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.


(Signature)

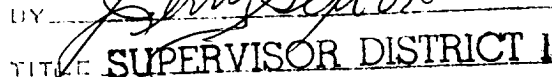
Administrative Supervisor

November 1, 1978

(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 7 1978

BY 
TITLE SUPERVISOR DISTRICT 1

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 calculation of the maximum term to be used in accordance with RULE 1104.

All wells on this form must be filled out completely for filing and must be filed with the Commission.

FPM and only F within I, II, III, and IV for changes of owner, well name or number, or transporter, or other such change of conditions.