

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

Operator  
 Address  
 K. K. Amini  
 P. O. Drawer 3068, 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

I. DESCRIPTION OF WELL AND LEASE

Lease Name  
 Pennzoil "35" State  
 Well No.  
 1  
 Pool Name, Including Formation  
 North Vacuum Abo  
 Kind of Lease  
 State, Federal or Fee State  
 Lease No.  
 L-3393-1  
 Location  
 Unit Letter  
 P  
 660 Feet From The  
 East  
 Line and  
 460 Feet From The  
 South  
 Line of Section  
 35  
 Township  
 16S  
 Range  
 34E  
 NMPM,  
 Lea  
 County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐  
 Mobil Pipe Line Company  
 Address (Give address to which approved copy of this form is to be sent)  
 P. O. Box 1073, Midland, Texas 79701  
 Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐  
 Address (Give address to which approved copy of this form is to be sent)  
 If well produces oil or liquids, give location of tanks.  
 Unit  
 P  
 Sec.  
 35  
 Twp.  
 16S  
 Rge.  
 34E  
 Is gas actually connected?  
 No  
 When

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

III. COMPLETION DATA

Designate Type of Completion - (X)  
 Oil Well ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☐  
 Date Spudded  
 7/11/75  
 Date Compl. Ready to Prod.  
 8/31/75  
 Total Depth  
 8903'  
 P.B.T.D.  
 Elevations (DS, RKB, RT, GR, etc.)  
 4047' G.L.  
 Name of Producing Formation  
 Abo  
 Top Oil/Gas Pay  
 8775'  
 Tubing Depth  
 8781'  
 Perforations  
 22 shots (8775' - 8825')  
 Depth Casing Shoe  
 TUBING, CASING, AND CEMENTING RECORD  
 HOLE SIZE  
 11"  
 CASING & TUBING SIZE  
 8 5/8"  
 DEPTH SET  
 1718'  
 SACKS CEMENT  
 800 sks  
 7 7/8"  
 4 1/2"  
 8903'  
 700 sks  
 2 3/8"  
 8781'

IV. 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  
 Length of Test  
 Bbls. Condensate/MMCF  
 Gravity of Condensate  
 Testing Method (pilot, back pr.)  
 Tubing Pressure (Shut-in)  
 Casing Pressure (Shut-in)  
 Choke Size

V. 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)  
 Comptroller  
 (Title)  
 10/29/75  
 (Date)

OIL CONSERVATION COMMISSION  
 APPROVED  
 OCT 31 1975  
 BY  
 SUPERVISOR DISTRICT I  
 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.