

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

Bobby F. Abernathy

Address

c/o Oil Reports &amp; Gas Services, Inc., Box 763, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

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

Other (Please explain)

**CASINGHEAD GAS MUST NOT BE  
FLARED AFTER 9/18/82  
UNLESS AN EXCEPTION TO R-4070  
IS OBTAINED.**If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Caswell Farms	1	Wildcat - Cisco	State, Federal or Fee Fee	
Location				
Unit Letter	I	: 1980 Feet From The South	Line and 660	Feet From The East
Line of Section	35	Township	15S	Range 34E, NMPM, Lea County

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
The Permian Corporation	P. O. Box 1183, Houston, Texas 77001					
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)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	I	35	15S	34E	No	

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

## COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
5/22/82	7/18/82	12,500	10,714					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
4052.9 GR	Cisco	10,567	10,548					
Perforations			Depth Casing Shoe					
10,567 - 75			10,752					

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8	360	400
12 1/4	8 5/8	4590	2300
7 7/8	5 1/2	10,572	275
	2 3/8	10,548	

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.)	
7/18/82	7/20/82	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	100#	Pkr	1 1/2"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
128 bbls	128	None	326

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

## CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Signature)

Agent  
(Title)

7/26/82

(Date)

## OIL CONSERVATION DIVISION

APPROVED JUL 27 1982, 19

BY DISTRICT SUPER.

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.

Separate Form C-104 must be filed for each pool in multiple completed wells.

LANDIS DRILLING COMPANY  
P. O. BOX 3579  
MIDLAND, TEXAS 79702

OPERATOR Danco Resources, Inc. ADDRESS One Energy Square, Suite 1A  
Abilene, TX 79601  
LEASE NAME Caswell Farms WELL NO. #1 FIELD \_\_\_\_\_  
LOCATION 1980'FSL & 660'FEL, Section 35, T-15-S, R-34-E, Lea County, New Mexico

DEPTH	ANGLE INCLINATION DEGREES	DISPLACEMENT	DISPLACEMENT ACCUMULATED
360	1	6.28	6.28
860	3/4	6.55	12.83
1501	1/2	5.60	18.43
1998	3/4	6.51	24.94
2309	3/4	4.07	29.01
2806	3/4	6.51	35.52
3267	3/4	6.03	41.55
3754	3/4	6.37	47.92
4154	1/2	3.49	51.41
4590	3/4	5.71	57.12
5090	3/4	6.55	63.67
5601	1	8.92	72.59
6127	1	9.18	81.77
6654	1	9.20	90.97
6788	1 1/4	2.92	93.89
7368	1	10.12	104.01
7864	1	8.66	112.67
8328	1	8.10	120.77
8859	2	18.53	139.30
8944	2 1/4	3.34	142.64
9444	2	17.45	160.09
9940	2 1/4	19.47	179.56
10,925	3 1/2	60.13	239.69
11,366	5	38.44	278.13
11,636	5 1/4	24.71	302.84
12,400	7	93.11	395.95
12,500	7 3/4	13.47	409.42

I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

LANDIS DRILLING COMPANY

Gary W. Chappell

TITLE Vice President - Contracts

AFFIDAVIT:

Before me, the undersigned authority, appeared Gary W. Chappell known to me to be the person whose name is subscribed herebelow, who on making deposition, under oath states that he is acting for and in behalf of the Operator of the well identified above, and that to the best of his knowledge and belief such well was not intentionally deviated from the true vertical whatsoever.

Samela A. Hughes  
AFFIDANT'S SIGNATURE

Sworn and subscribed to in my presence on this the 15th day of July, 1982.

Samela A. Hughes  
Notary Public in and for the  
County of Midland, Texas