

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		X
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 Trebol Drilling Company		
Address P. O. Box 3986, Odessa, Texas 79760		
Reason(s) for filing (Check proper box)		
New Well <input type="checkbox"/>	Change in Transporter of:	Other (Please explain)
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner **Southern New Mexico Oil Corporation**
P. O. Box 1659, Midland, Texas

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lusk Deep Unit	Well No. 2	Pool Name, Including Formation Lusk - Morrow	Kind of Lease 3000, Federal 3000	Lease No. NM 266
Location Unit Letter 0 ; 660 Feet From The South Line and 1980 Feet From The East Line of Section 18 Township 19S Range 32E , 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 79704	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Phillips Building, Odessa, Texas 79760	
If well produces oil or liquids, give location of tanks.	Unit 018 Sec. P Twp. 1 Rge. 1	Is gas actually connected? No When 10-1-66

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 10-16-60	Date Compl. Ready to Prod. 3-13-61	Total Depth 13,974	P.B.T.D. 12,503					
Elevations (DF, RKB, RT, GR, etc.) 3585 GR	Name of Producing Formation Morrow	Top XX /Gas Pay 12,380	Tubing Depth 12,416					
Perforations 12380 - 12398			Depth Casing Shoe 12,416					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8 csg.	4,462	3,400
12 1/4	9 5/8 csg.	11,400	525
8 3/8	5 liner	13,551	717 cu. ft.
- -	2 3/8 tbg.	12,416	Pkr. @ 12,280

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	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 3,420	Length of Test 24 hours	Bbls. Condensate/MMCF 40.34	Gravity of Condensate 56°
Testing Method (pitot, back pr.) Multi point Back pr.	Tubing Pressure (shut-in) 3,336	Casing Pressure (shut-in) Pkr.	Choke Size 10/64

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.

Walter E. Lockett
(Signature)
Drilling and Production Superintendent
(Title)
September 9, 1966
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
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.