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

NEW MEXICO OIL CONSERVATION COMMISS. . .  
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  
M. O. Davis  
Address  
1203 E. 56th St., Odessa, Texas 79760  
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

II. DESCRIPTION OF WELL AND LEASE  
Lease Name K. G. Well No. 1 Pool Name, including Formation E. K. Queen Kind of Lease State, Federal or Fee Fed. Lease No. NM 0523201  
Location  
Unit Letter B 1980 Feet From The East Line and 660 Feet From The North  
Line of Section 19 Township 13S Range 34E , NMFM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
Texas New Mexico Pipe Line Company Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 1510, 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 Sec. Twp. Rge. Is gas actually connected? When  
B 19 18 34 No

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.  
X  
Date Spudded 10-18-63 Date Compl. Ready to Prod. 10-31-63 Total Depth 11650' P.B.T.D.  
Elevations (DF, RKB, RT, GR, etc.) 4073 GL Name of Producing Formation Queen Top Oil/Gas Pay 4452 Tubing Depth 4400  
Perforations In. Cg. From 4452' - 4492' 116 1/2' Depth Casing Shoe 4650'  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
11 8 5/8" 290' 175  
6 1/8 4 1/2" 4650' 230

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 Nov. 1, 1968 Date of Test Nov. 4, 1968 Producing Method (Flow, pump, gas lift, etc.) Flow  
Length of Test 24 hrs. Tubing Pressure 0 Casing Pressure 0 Choke Size Open  
Actual Prod. During Test 450 Oil-Bbls. 225 Water-Bbls. 225 Gas-MCF 250 MCF

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.  
M. O. Davis  
By Hamed Kurey (Signature)  
Agent (Title)  
November 5, 1968 (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.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.