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G.S.		
D OFFICE		
NSPORTER	OIL	
	GAS	
RATOR		
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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-1
Effective 1-1-63

ELL OIL COMPANY

O. BOX 991, HOUSTON, TEXAS 77001

on(s) for filing (Check proper box)

Well ☐ Change in Transporter of ☐
Completion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

FORMERLY:

Bowers A Federal #4

Range of ownership give name Exxon Corp. P.O. Box 1600 Midland, TX 79702
Address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Jobbs(G/SA)Unit Sec. 30	441	Holms G/SA	Federal	
Location	Init Letter	P	330	Feet From The South Line and 330 Feet From The East
Line of Section	30	Township	18S	Range 38E, 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)
Shell Pipeline	P.O. Box 1910 Midland, TX 79702
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)
Phillips Pipeline	4001 Penbrook St. Odessa, TX 79762
Well produces oil or liquids, or location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	NO CHANCE Yes NA

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't.	Diff. Res't
ie Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
ventions (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
ifications			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE
L 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)

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

AS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Cementing Method (pilot, 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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

J. FORE, SENIOR ENGINEERING TECHNICIAN

JANUARY 25, 1980

OIL CONSERVATION COMMISSION

APPROVED FEB 1 1980, 19
BY Jerry Sexton
TITLE Dist. L. Supv.

This form is to be filled 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 deviat tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on now and re-completed wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter or other such change of condition.