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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

I. Operator **Forest Oil Corporation**
Address **Box 4106, Odessa, Texas 79760**
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Economy Leasing ☐ 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 B Lee State	Well No. 7	Pool Name, including Formation Vacuum (Gbg-San Andres)	Kind of Lease State, Federal or Fee State
Location Unit Letter E ; 2119 Feet From The N Line and 918 Feet From The W Line of Section 7 , Township 18-S Range 35-E , NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input 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 Bldg, 4th & Washington, Odessa, Texas					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 7	Twp. 18-S	Rge. 35-E	Is gas actually connected? Yes	When 4/3/70

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) X	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>		
Date Spudded 2/24/70	Date Compl. Ready to Prod. 4/3/70	Total Depth 4,772	P.B.T.D. 4,740
Pool Vacuum	Name of Producing Formation Grayburg-San Andres	Top Oil/Gas Pay 4,354	Tubing Depth 4,726
Perforations 4426-4712	Depth Casing Shoe 4,772		
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE 11"	CASING & TUBING SIZE 8-5/8"	DEPTH SET 1649	SACKS CEMENT 550
6-3/4"	4-1/2"	4772	650
	2-3/8"	4726	Tubing

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 4/3/70	Date of Test 4/4/70	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure 30	Casing Pressure 30	Choke Size 2"
Actual Prod. During Test	Oil-Bbls. 131	Water-Bbls. 56	Gas-MCF 43

GAS WELL

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

J. R. Clark
(Signature)
Division Production Engineer
(Title)

April 6, 1970
(Date)

J. R. CLARK

OIL CONSERVATION COMMISSION

APR 8 1970
APPROVED

BY **Leslie A. Clements**

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 Sections I, II, III, and VI only 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.