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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
Amini Oil Corporation
Address
400 Wall Towers West- Midland, Texas 79701
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Marathon - State	1	(Undesignated) Vacuum Abo, North	State, Federal or Fee State	B-2244
Location				
Unit Letter	D	860 Feet From The	North Line and	660 Feet From The
				West
Line of Section	12	Township	17-S	Range
				34-E
				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"/>	Address (Give address to which approved copy of this form is to be sent)	
Mobil Pipeline Company (Connected 3-16-71)	P.O. Box 900 Dallas, Texas 75221	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Company	Bartlesville, Oklahoma 74003	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	D	12
	17-S	34-E
	No	As Soon As Possible.

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	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
12-5-70	2-6-71		8680		----			
Elevations (DF, RKB, RT, GR, etc.,)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
4037 GR	Vacuum Abo, North		8559'		8586			
Perforations					Depth Casing Shoe			
8559', 60, 61, 83, 87, 88, 89, 90, 91, 92, 93, 94, 8601, 02, 03					8680			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		1672		1100 sacks			
7-7/8"	5-1/2"		8694		1700 sacks			
	2-3/8 tubing		8586					

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.)	
2-10-71	2-11-71	Pumping 2"x1-1/4"x16'x20' Sargent REBC	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	30#	30#	----
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	150	-0-	128

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

Agent
(Signature)
(Title)
March 15, 1971
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY John W. Rangan
TITLE Geologist

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.