

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

DISTRIBUTION	
ANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I. OPERATOR
Burleson & Huff

Address
P. O. Box 551, Midland, Texas 79701

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter ☐

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

Well No. **4** Kind of Lease **Federal** Lease No. **NA-5963**

Location **N 34° 30' 00" E 27° 12' 30" S 12-5** Section **27** Township **12-5** Range **3E** County **Lea**

Unit Letter **27** Feet From The **12-5** Line and **3E** Feet From The **Lea** Line

Line of Section **27** Township **12-5** Range **3E** County **Lea**

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate **Phillips Petroleum Corporation** Address (Give address to which approved copy of this form is to be sent) **Phillips Petroleum Corporation, P.O. Box 1000, Bartlesville, Oklahoma 74003**

Name of Authorized Transporter of Casinghead Gas or Dry Gas **Phillips Petroleum Company** Address (Give address to which approved copy of this form is to be sent) **Bartlesville, Oklahoma 74003**

If well produces oil or liquids, give location of tanks. **Unit 27 12-5 3E** Is gas actually connected? **Yes** When **7-20-74**

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.

Date Spud **8-14-74** Date Completed **7-27-74** Total Depth **4075'** P.B. **4075'**

Elevation **3731' BP** Name of Producing Formation **Queen** Top **3745'** Tubing Depth **4075'**

3895, 3892, 3894, 3906, 3913, 3915, 3917 Depth Casing Shoe **475'**

TUBING, CASING, AND CEMENTING RECORD

1-1/2" SIZE	CASING & TUBING SIZE	DEPTH SET	1 SACKS CEMENT
7-3/4"	4-1/2" casing	4075'	400 sacks

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 Run To Tanks **7-27-74** Date of Test **7-27-74** Producing Method (Flow, pump, gas lift, etc.) **Flow**

Length of Test **24 hrs.** Tubing Pressure **170** Casing Pressure **170** Choke Size **2 1/2"**

Actual Prod. During Test **11** Oil - Bbls. **51** Water - Bbls. **0** Gas - MCF **67.3**

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.

Partner (Signature)

7/23/74

(Date)

OIL CONSERVATION COMMISSION

APPROVED **[Signature]**, 19 **74**
BY **[Signature]**
TITLE **SUPPLY**

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 multiple