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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 **Cleveland Energy Corporation**
Address **720-S Candalaria N.E., Albuquerque, N.M. 87112**
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other **CASINGHEAD GAS MUST NOT BE FLARED AFTER 12/1/74 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.**

If change of ownership give name and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Cleveland Energy Corp.	Well No. 1	Pool Name, Including Formation Wolfcamp R-4937	Kind of Lease State, Federal or Fee State	Lease No. LA 605
Location: Unit Letter I ; 660 Feet From The East Line and 200 Feet From The South Line of Section 10 Township 10S Range 2E , 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"/> Navajo Crude Oil Purchasing Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 175	
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)	
If well produces oil or liquids, give location of tanks.	Unit 10	Sec. 10
	Twp. 10S	Rge. 2E
	Is gas actually connected? No When	

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input 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 7/25/74	Date Compl. Ready to Prod. 9/7/74		Total Depth 11,800'		P.B.T.D. 10,800'			
Elevations (DF, RKB, RT, GR, etc.) 5817 GL	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 10,801'		Tubing Depth 10,480'			
Perforations 10,805-714 & 10,811-1/2 - 10,800 Wolfcamp					Depth Casing Shoe 10,845'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 17-1/2	CASING & TUBING SIZE 12 1/4		DEPTH SET 74.00		SACKS CEMENT 450 SXS.			
11	8-1/2		4,157.10		440 SXS.			
7-7/8	5-1/2		10,845.00		250 SXS.			
	4-7/8		10,845.00					

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 9/28/74	Date of Test 10/5/74	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24	Tubing Pressure 100-10	Casing Pressure 110	Choke Size 1/4"
Actual Prod. During Test	Oil-Bbls. 2	Water-Bbls. 7	Gas-MCF 280

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.


J. C. Johnson Agent (Signature)

10/24/74 (Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED **10/29/1974**, 19____
BY **John W. Ryan**
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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.