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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-1  
Effective 1-1-65

I. Operator  
**ESTES ENGINEERING**  
Address  
**306 Petroleum Bldg., Midland, Texas 79701**

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐  
Change in Ownership ☐ Casinghead Gas ☐ Dry Gas ☐  
Condensate ☐

**Oil Casinghead Gas MUST NOT BE  
FLARED AFTER 9/1/75  
UNLESS AN EXCEPTION TO R-4070  
IS OBTAINED.**

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.					
State	1	Hobbs Grayburg	State, Federal or Fee State	K-5218					
Location	Unit Letter	P	660	Feet From The	South	Line and	660	Feet From The	East
Line of Section	14	Township	18-S	Range	37-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)					
Shell Pipe Line Corporation	P.O. Box 1910, Midland, Texas 79701					
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	Sec.	Twp.	Rge.	Is gas actually connected?	When
	P	14	18-S	37-E		

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.	Ill. Resrv.
	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
5/15/75	6/25/75	4150'	4132'					
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Length					
3690 RKB	Grayburg	4030'	4126'					
Perforations			Depth Casing Shoe					
4030 - 4126			4149					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8" OD	350'	275					
7-7/8"	4-1/2"	4149	350					
	2-3/8"	4126						

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.)	
6/25/75	7/16/75	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	-	15 psig	-
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	19	36	52

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.

*Russell H. Estes*  
(Signature)  
Engineer

6/17/75

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUL 24 1975**, 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.