

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104  
Supersedes Old C-104 and C-11  
Effective 1-1-55

SALE TAX		
FILE		
G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

I. Operator  
K. K. Amini  
Address  
P. O. Drawer 3068, Midland, Texas 79701  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
CASINGHEAD GAS MUST NOT BE  
PLACED AFTER 10/17/75  
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  
State - Com  
Well No. 2  
Pool Name, including Formation  
North Vacuum ABO  
Kind of Lease  
State, Federal or Fee State  
Lease No.  
E-754  
Location  
Unit Letter J  
1980 Feet From The South Line and 1980 Feet From The East  
Line of Section 2  
Township 17S  
Range 34E  
NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐  
The Permian Corporation  
Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 3119, Midland, Texas 79701  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐  
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 H  
Sec. 2  
Twp. 17S  
Rge. 34E  
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 ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☐  
Date Spudded  
06/17/75  
Date Compl. Ready to Prod.  
08/17/75  
Total Depth  
8775'  
P.B.T.D.  
Elevations (DF, RKB, RT, GR, etc.)  
4045.1 G. L.  
Name of Producing Formation  
ABO  
Top Oil/Gas Pay  
8694'  
Tubing Depth  
8712'  
Perforations  
15 shots (8694'-8705.5')  
Depth Casing Shoe  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE  
11"  
7 7/8"  
CASING & TUBING SIZE  
8 5/8"  
4 1/2"  
2 3/8"  
DEPTH SET  
1712'  
8778'  
8712'  
SACKS CEMENT  
1150 SKS  
700 sks

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  
08/17/75  
Date of Test  
08/18/75  
Producing Method (Flow, pump, gas lift, etc.)  
Pumping  
Length of Test  
24Hours  
Tubing Pressure  
Casing Pressure  
32  
Choke Size  
Actual Prod. During Test  
102  
Oil-Bbls.  
102  
Water-Bbls.  
TSM  
Gas-MCF  
127

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.

Comptroller

(Signature)

(Title)

August 19, 1975

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19

BY John W. Runyan

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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.