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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
Inexco Oil Company
Address
1100 Milam Building, Suite 1900 Houston, Texas 77002
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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE *Heat Santa Wolfcamp R-6476*
Lease Name: Federal Com. 7 Well No.: 2 Pool Name, including Formation: Wildcat Kind of Lease: State Lease No.: NM2843-A
Location
Unit Letter: E; 1980 Feet From The north Line and 660 Feet From The west
Line of Section: 7 Township: 19S Range: 33E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Koch Oil Company	P.O. Box 3609 Midland, Texas 79701	
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)	
Llano, Inc.	P.O. Drawer 1320 Hobbs, New Mexico 88240	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	E	7
		19S
		33E
Is gas actually connected?	When	
yes	5-02-79	

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.			
1-18-79	8-04-80		13,800'		13,636'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3659.4 GR	Wolfcamp		10,892'		10,837'			
Perforations					Depth Casing Shoe			
10,892' - 10,917'								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2	13-3/8		509.50		485			
12-1/4	8-5/8		5104.00		2500			
7-7/8	5-1/2		13800.00		225			

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.)	
8-04-80	8-04-80	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	1050#	P.O.	10/64"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	239 Bbls.	0 Bbls.	163 MCF

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.

Cynthia D. Bator
(Signature)

Production Clerk
(Title)

8-05-80
(Date)

OIL CONSERVATION COMMISSION

APPROVED *[Signature]*, 19
BY *[Signature]*
TITLE **SUPERVISOR DISTRICT 1**

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.