		19 million - 19 mi	······	
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	DISTRIBUTION	NEW MEXICO OIL CO	INSERVATION COMMISSION	Form C-104
	SANTA FE	REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-11. Effective 1-1-65
	FILE		AND NSPORT OIL AND NATURAL GA	6
		AUTHORIZATION TO TRAP	SPORT UIL AND NATURAL GA	3
	CANSPORTER DIL GAS		•	
1.	Operator			
	The Superior Oil Company			
	Nine Greenway Plaza, Suite 2700, Houston, Texas 77046 Reeson(s) for filing (Check proper box) Other (Please explain)			
	New Well	Change in Transporter of:	Form C-104 dated Filed in error.	12/26/84
	Recompletion	Casinghead Gas Condens	Filed in error. I	Please cancel.
1	If change of ewnership give name			
and address of previous owner No change in ownership.				<u></u>
B. DESCRIPTION OF WELL AND LEASE Well No.; Pool Name, Including Formation Kind of Lease				Lease No.
	Bondurant Federal	1 Buffalo - Peni	n State, Føderal o	Fee Federal NM-1256
Location Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East				•East
		nship 195 Range 3	2E , NMPM ,	Lea County
	DESIGNATION OF TRANSPORT	TER OF OUL AND NATURAL GAL	s	
	Name of Authorized Transporter of Oil	C or Condensate X	Address (Give address to which approve	
	Koch Oil Company of Tex	Kas or Dry Gas 🕅	P.O. Box 1558, Brecken Address (Give address to which approve	cldge, 1X /6024 d copy of this form is to be sent)
	Phillips Pipeline Compa		4001 Penbrook, Odessa,	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. I 1 195 32E	Is gas actually connected? When YeS	12-15-83
	If this production is commingled with	<u>ور الم الم الم الم الم الم الم الم الم الم</u>		•
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Difi. Res'v.
	Designate Type of Completion	n - (X)		1 L
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		1		
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal able (or this denth or be (or full 24 hours))				nd must be equal to or exceed top allow-
•	Oll. WELL able for this dep Date First New Oil Run To Tanks Date of Test		pth or be for full 24 hours) Producing Method (Flow, pump, ges lift, etc.)	
				Choke \$130
	Length of Tee'	Tubing Pressure	Casing Pressure	
	Actual Prod. During Test	Oil - Bhis.	Water - Bbis.	Gas - MCF
	GAS WELL Actual Pred. Test-MCF/D	Length of Test	Bbis. Condensate/I&ICF	Grevity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shat-in)	Casing Pressure (Skut-in)	Choke Size
		1		
VI.	I. 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.		FEB 27	1985
			APPROVED	
	W.B. de		li an er en fan attam	the for a namely drilled of deepened
	Mobil Producing TX, & N.M. Inc. as Agent for		If this is a request for anomalo by a tabulation of the deviation well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 111. All sections of this form must be filled out completely for allow- able 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 filled for each pool in multiply	
	(Title) January 24, 1985 (Defe)			
			Il Separate Forms C-104 must	As 17120 this and har to manihil

