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LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COM. SIO
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 Energy Oil Company
Address P.O. Box 100, Odessa, New Mexico (NM)
Reason(s) for filing ☒ Check proper box ☐ Other (If lease explain)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐ Formerly Tidewater GO State "F" #10
If change of ownership give name and address of previous owner Formerly (Oil Company), Odessa, Texas Lease No. 1004

II. DESCRIPTION OF WELL AND LEASE

Lease Name	State "BA"	Well No.	10	Pool Name, including Formation	Vacuum Blinbry	State, Federal or Foreign	State	Lease No.	B-1565
Location									
West Letter	A	660	Feet From The	North	Line and	760	Feet From The	East	
Line of Section	36	Township	17S	Range	34E	County	Lea	County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<u>Texas Eastern Pipeline</u>	<u>Box 1500, Midland, Texas</u>					
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)					
<u>Phillips Petroleum Co.</u>	<u>Phillips Bldg., Odessa, Texas</u>					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually compressed?	When
	C	36	17	34	Yes	

If this production is commingled with that from any other lease or pool, give commingling order number PC 147

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	Low Well	Workover	Refracture	Perforations	Depth Casing Shoe
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.				
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pnt.	Casing Depth				
Perforations		Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back prod.)	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.

Arden D. Anderson
(Signature)

September 1967
(Date)

(Date)

OIL CONSERVATION COMMISSION

APPROVED

OCT 3 1967, 19

BY

TITLE

SUPERVISOR OF SIO

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.