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FILE
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

CORRECTED REPORT

I. OPERATOR
PRORATION OFFICE
Operator
Address
D. V. St. Clair
501 First National Bank Building, Midland, Texas
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐ To show correct perforations
Change in ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name
Superior-Federal
Well Name, Location, and Depth Perforation
7 Pearl Queen Ext.
State, Federal or Free
Federal
Location
Unit Letter **G** Feet From The **1980'** North Line and **1980'** East
Line of Section **25** Township **-19-S** Range **-34-E** County **Lea**

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate
Shell Pipeline Corp.
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas
Phillips Petroleum Co.
Address of address to which approved copy of this form is to be sent
P. O. Box 1910, Midland, Texas
Phillips Bldg., Odessa, Texas
If well produces oil or liquids,
give location of tanks.
Unit **F** Sec. **25** Twp. **19** Rge. **34** Is well actually connected? **Yes** When **4-19-65**

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'tn.	Diff. Res'tn.
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.T.D.					
3-30-67	4-18-67	5154	5122					
Pool	Name of Producing Formation	Top Oil, Gas or	Tubing Depth					
Pearl Queen	Queen Sand	4941	5065					
Perforations	Depth Casing Shoe							
4941, 5010, 5017 & 5060	5142							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8 5/8"	24#	273	125 sks. circulated				
7 7/8"	5 1/2"	15.50#	5142	270 sks. 50-50 Posmix				
5 1/2"	2 3/8"	4.7#	5065	Top of cement 2950'				

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)

Length of Test	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
4-25-67	9-29-67	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24	-	30#	2"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MMCF
23	6	17	7

GAS WELL

Actual Prod. Test-MMCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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.

George Van Housen
(Signature)

Agent
(Title)

10-19-67
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY _____

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 Sections I, II, III, and VI only 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.