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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
Pennzoil United, Inc.
Address
P. O. Drawer 1828 - 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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mobil "24" State	Well No. 1	Pool Name, including Formation North Vacuum Abo	Kind of Lease State, Federal or Fee State	Lease No. B-1106
Location Unit Letter H ; 2121 Feet From The North Line and 801 Feet From The East Line of Section 24 Township 17-S Range 34-E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Admiral Crude Oil Corp. (Trucks)	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1713-V&J Tower - Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Adams Building - Bartlesville, Oklahoma					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 24	Twp. 17S	Rge. 34E	Is gas actually connected? No	When Soon

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9-19-68	Date Compl. Ready to Prod. 10-20-68		Total Depth 8653'		P.B.T.D. 8620'			
Elevations (DF, RKB, RT, GR, etc.) DF 4025'	Name of Producing Formation Abo		Top Oil/Gas Pay 8527'		Tubing Depth 8500'			
Perforations 8527 - 8582' (Total of 16 holes)					Depth Casing Shoe 8653'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		352		290			
11	8 5/8"		4,000		720			
7 7/8"	4 1/2"		8,653		585			
	2 3/8"		8,500		-			

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 10-25-68	Date of Test 10-25-68	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 16 hrs	Tubing Pressure 80-90	Casing Pressure Pkr	Choke Size 3/4"
Actual Prod. During Test	Oil-Bbls. 268	Water-Bbls.	Gas-MCF 144

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.

PL Schuchman
(Signature)
Petroleum Engineer
(Title)
10-29-68
(Date)

OIL CONSERVATION COMMISSION
APPROVED _____, 19____
BY **J. C. [Signature]**
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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.