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SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR				
PRORATION OFFICE				
Operator				
Charles B. Read				
4 1 1				

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTA FE	REQUEST FO	OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65	
FILE	AND C. C.			
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE		δερ <sup>11</sup> 10 7,5 1	.11 <b>7</b> 69	
IRANSPORTER OIL				
GAS				
OPERATOR OFFICE				
PRORATION OFFICE				
Charles B. Read				
Address				
P.O. Box 2126, F	Roswell, New Mexico 88	Other (Please explain)		
Reason(s) for filing (Check proper box)		Office (1 tease explain)		
New We!1	Change in Transporter of: Oil Dry Gas			
Recompletion	Casinghead Gas Condensa	ate 🔲		
Change in Ownership				
If change of ownership give name				
and address of previous owner		2		
II. DESCRIPTION OF WELL AND L	EASE Qual - Quee	R-3843	Lease No.	
Lease Name			G2001	
State "C"	1 Quail Queen (	undes.)		
Location	O Feet From The South Line	1980 Feet From T	West	
Unit Letter K; 208	Feet From The South Line	and reet rom re		
Line of Section 11 Tow	nship 19S Range	34E , NMFM,	Lea County	
Line of Section 11 Tow	nomp			
II. DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approv	ed conv of this form is to be sent)	
Name of Authorized Transporter of Cil	X or Condensate			
Admiral Crude Oil Cor		P.O. Box 1713, Midlan Address (Give address to which approv	ed copy of this form is to be sent)	
Name of Authorized Transporter of Cas	inghead Gas X or Dry Gas	Address (Give dauless to which applica		
Vented	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n	
If well produces oil or liquids,	Unit   Sec.   Twp.   Hge.	No		
give location of tanks.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
If this production is commingled wit	th that from any other lease or pool, g	Tive comminging order trans-	D. A. D. M. Books	
IV. COMPLETION DATA	On wen	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
Designate Type of Completic		X	P.B.T.D.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	5137'	
3/29/69 Elevations (DF, RKB, RT, GR, etc.)	9/1/69	51681 Top Oil/Gas Pay	Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	5028'	5036' RKB	
3976 GL Perforations 5033-34 & 47	Penrose	5028	Depth Casing Shoe	
			5168' RKB	
5028-32' & 5083-88'	TUBING, CASING, AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
11"	8 5/8"	407' RKB	150 sx	
7 7/8"	5 1/2"	5168' RKB	250 sx	
	2 3/8"	5036' RKB		
			and must be equal to or exceed top allow-	
V. TEST DATA AND REQUEST F	'OR ALLOWABLE (Test must be a) able for this de	nth or be for full 24 hours	and must be equal to or exceed top allow-	
Oll. WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	fi, etc.)	
9/1/69	9/1/69	Pumping		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
24 hrs	0	Pkr	Open 2 3/8"	
Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	TSTM	
22	7	15		
<u> </u>			<u>*</u>	
GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Actual Prod. Test-MCF/D	Long. 10-1			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
Testing Marinor (Secondary Sec. S. A.				
VI. CERTIFICATE OF COMPLIAN	NCE	OIL CONSERY	ATION COMMISSION	
VI. CERTIFICATE OF COMPLIA			19	
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.		0.4		
		BY John W.	rungan	
above is true and complete to the	no ocar or my mineral and and a service	Constant		
		TITLE		
	This form is to be filed in compliance with RULE 1104.			
- mun - time		If this is a request for allowable for a newly drilled or deepene well, this form must be accordance with RULE 111.		
(Si <sub>i</sub>	gnature)			
	ent	All sections of this form n	nust be filled out completely for allow wells.	
	Title)	able on new and recompleted	TH for changes of OWNE	

# 1060 1060

able on new and recompleted wells.

Fill our only Sections I. II. III. Will out only Sections I. II. III, and VI for changes of owner,