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	GAS	
OPERATOR		
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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

Operator Vernon E. Faulconer	
Address 1100 Peoples National Bank Bldg. Tyler, Texas 75702	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner Freeport Oil Company P.O. Box 3038 - Midland, Texas 79702

I. DESCRIPTION OF WELL AND LEASE

Lease Name Mattie Price	Well No. 4	Pool Name, Including Formation West Garrett (Devonian)	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter 0 ; 1650 Feet From The East Line and 980 Feet From The South				
Line of Section 6 Township 17S Range 38E , NMPM, Lea County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) Box 1027, Lovington, N.M. 88260			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent) None			
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 6	Twp. 17S	Rge. 38E
				Is gas actually connected? No
				When

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

V. 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 November 1, 1970	Date Compl. Ready to Prod. March 5, 1971	Total Depth 12,906'	P.B.T.D. 12,906'					
Elevations (DF, RKB, RT, GR, etc.) 3725.7 GR	Name of Producing Formation Devonian	Top Oil/Gas Pay 12,842'	Tubing Depth 8,000'					
Perforations Open Hole 12,847 - 12,906'			Depth Casing Shoe 12,847'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
17-1/2"	13-3/8"	407'		400				
11"	8-5/8"	5,208'		575				
7-7/8"	5-1/2"	12,847'		525				
	2-7/8"	8,000'						

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 (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.


(Signature)

Operator
(Title)

11-1-79
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 30 1979, 19
Orig. Signed By
BY erry Sexton
Dist 1, Supv.
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