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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

I. Operator  
Tom L. Ingram  
Address  
P. O. Box 1757 - Roswell, New Mexico 88201  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐  
Recompletion ☐ Oil ☐ Condensate ☐  
Change in Ownership ☐ Casinghead Gas ☐  
**Oil and Gas MUST NOT BE FLARED OR BURNED UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.**

If change of ownership give name and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name State 'M'	Well No. 1	Pool Name, including Formation Vacuum-Abo Reef	Kind of Lease State, Federal or Fee State	Lease No. L-134
Location Unit Letter '0' 330 Feet From The South Line and 1650' Feet From The East Line of Section 18 Township 17 South Range 36 East, 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"/> The Permian Corporation - Trucks	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183 - Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 18	Twp. 17S	Rge. 36E	Is gas actually connected? No - Vented	When Awaiting Connection

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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded 5/21/71	Date Compl. Ready to Prod. 9/1/71		Total Depth 9041'		P.B.T.D. 8995'			
Elevations (DF, RKB, RT, GR, etc.) 3886 GR	Name of Producing Formation Abo Reef		Top Oil/Gas Pay 8915'		Tubing Depth 8885'			
Perforations 9006 - 8915, 17, 37, 40, 43, 47, 61, 63, 77, 80, 82					Depth Casing Shoe 9041'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17"	13-3/8		340		400 sx circ.			
11"	8-5/8		3406		200 sx			
7-7/8"	5-1/2		9041		300 sx			
	2-3/8		8885					

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)

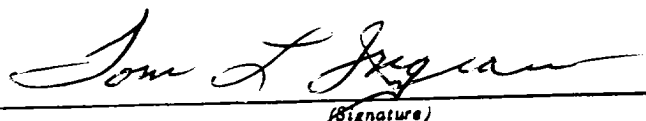
Date First New Oil Run To Tanks 9/1/71	Date of Test 9/1/71	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure --	Casing Pressure --	Choke Size --
Actual Prod. During Test	Oil-Bbls. 252	Water-Bbls. 120	Gas-MCF 226

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.



Operator

(Title)

9/7/71

(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 9 1971, 19

BY Joe D. Ramey

TITLE Dist. I, Supv.

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

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SEP 10 1971

U.S. CONSERVATION COMM.  
WASH., D. C.