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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
Pubco Petroleum Corporation
Address
P. O. Box 869, Albuquerque, New Mexico 87111
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)
Casinghead Gas MUST NOT BE
PLANTED ANY DE
2/1/73
HOURS AS EXCEPTION TO R-4070
IS OBTAINED.
If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name Shipp Lease No. Well No. 4 Pool Name, Including Formation Wildcat Kind of Lease
State, Federal or Fee Fee
Location
Unit Letter L ; 1874 Feet From The South Line and 554 Feet From The West
Line of Section 11 Township 17S Range 37E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Permian Corporation Address (Give address to which approved copy of this form is to be sent)
Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
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 L Sec. 11 Twp. 17S Rge. 37E Is gas actually connected? No When

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 X Gas Well New Well X Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded 2/02/73 Date Compl. Ready to Prod. 4/26/73 Total Depth 11,760' P.B.T.D. 10,318'
Elevations (DF, RKB, RT, GR, etc.) 3765' KB Name of Producing Formation Wolfcamp Top Oil/Gas Pay 11,368 Tubing Depth 9453
Perforations 9594-9648' Depth Casing Shoe 11,768'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17-1/2" 13-3/8" 410' 350
12-1/4" 9-5/8" 4750' 375
8-3/4" 5-1/2" 11768' 780

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 4/27/73	Date of Test 4/28/73	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 70#	Casing Pressure --	Choke Size 32/64"
Actual Prod. During Test	Oil-Bbls. 322	Water-Bbls. 0	Gas-MCF 256

GAS WELL
Actual Prod. Test-MCF/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.
J. C. Johnson (Signature)
Vice President Production (Title)
April 30, 1973 (Date)
OIL CONSERVATION COMMISSION
APPROVED _____, 19_____
BY John W. Pennington
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.