

DISTRIBUTION	
SANTA FE	
FILL	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION 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-1
Effective 4-1-65

Operator THE SUPERIOR OIL COMPANY	
Address P. O. BOX 71 Conroe, Texas 77301	
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 type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name GOVERNMENT "E"	Lease No. NM-086	Well No. 6	Pool Name, including formation LEA (SAN ANDRES)	Kind of Lease State, Federal or Free FEDERAL
Location				
Unit Letter H	1800	Feet From The North Line and	990	Feet From The East
Line of Section 25	Township 19S	Range 34E	LEA	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
PERMIAN CORPORATION (Truck)	1509 West Wall, Midland, Tx 79701					
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)					
WARREN PETROLEUM COMPANY	Box 1589 Tulsa, Oklahoma 74102					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 25	Twp. 19S	Rge. 34E	Is gas actually connected? YES	When 4-1-77

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12-11-75	Date Compl. Ready to Prod. 8-31-76	Total Depth 6200'	P.B.T.D. 5964'					
Elevations (DF, RKB, RT, GR, etc.) RKB: 3772' GR 3761'	Name of Producing Formation SAN ANDRES	Top Oil/Gas Pay 5886'	Tubing Depth 5925'					
Perforations 5886-5906' w/2 0.48# jets/ft.	Depth Casing Shoe 6200'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11'	8-5/8"	410'	300 sx.
7-7/8"	5 1/2"	6200'	800 sx.
	2-7/8"	5925'	

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 8-31-76	Date of Test 8-31-76	Producing Method (flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hrs.	Tubing Pressure 75	Casing Pressure 25	Choke Size ---
Actual Prod. During Test 6	Oil-Bbls. 3	Water-Bbls. 3	Gas-MCF NIL

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

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.

P.R. Blance
(Signature)

Operations Engineer

(Title)

April 12, 1977

PRB:jf

(Date)

OCC(5)/WNM/MLL/JTR/C File

OIL CONSERVATION COMMISSION

APR 12 1977
APPROVED

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BY

Orig. Signed by

John R. Ryan

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 multiple.