

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-11
Effective 1-1-65

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRODUCTION OFFICE			

I. Operator
DAVID FASKEN

Address
608 First National Bank Building, Midland, Texas 79701

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)
Request 3600 barrels testing allowable for July 1979.

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Warren	Well No. 1	Pool Name, Including Formation Wildcat	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Unit Letter G ; 2080 Feet From The North Line and 1980 Feet From The East				
Line of Section 8 Township 17-S Range 37-E, 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"/> P & O FALCO INC.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 108 Shreveport, LA 71161
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> None	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 G Sec. 8 Twp. 17 Rge. 37	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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5-25-79	Date Compl. Ready to Prod. 7-20-79	Total Depth 11,980'	P.B.T.D. 11,931 K.B.					
Elevations (DF, RKB, RT, CR, etc.) 3784.1 GR	Name of Producing Formation Devonian	Top Oil/Gas Pay 11,818'	Tubing Depth 11,612'					
Perforations			Depth Casing Shoe 11,977'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8" csg.	400'	300 Lite + 100 Class "C"					
12-1/4"	8-5/8" csg.	4396'	1400 Lite + 200 Class "C"					
7-7/8"	5-1/2" csg.	11977'	275 Lite + 375 Class H + 550 Lite + 100 "C"					
	2-3/8" tbq.	8300'						

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)

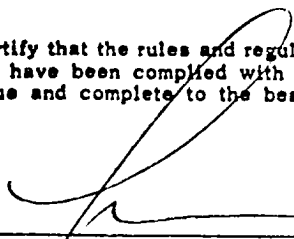
Date First New Oil Run To Tanks 7/20/79	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test Request permission	Tubing Pressure to move oil to conduct production tests.	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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.


S. L. Parks
(Signature)
Agent
(Title)
7/20/79
(Date)

OIL CONSERVATION COMMISSION
JUL 24 1979

APPROVED _____, 19____
BY _____ Orig. Signed by
Jerry Sexton
TITLE _____ Dist 1, 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 multiple