

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	
PRORATION OFFICE	

I. Operator
JOSEPH I. O'NEILL, JR.
Address
P. O. BOX 2840, MIDLAND, TEXAS 79702
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other **CASINGHEAD GAS MUST NOT BE
FLARED AFTER 11/1/82
UNLESS AN EXCEPTION TO 2-4070
IS OBTAINED.**

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, Including Formation	Kind of Lease
ORA JACKSON		1	SCHARB BONE SPRINGS	State, Federal or Fee FEE
Location				
Unit Letter L	660	Feet From The WEST	Line and 1980	Feet From The SOUTH
Line of Section 5	Township 19S	Range 35E	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"/>	Address (Give address to which approved copy of this form is to be sent)
THE PERMIAN CORPORATION	P.O. BOX 3119, MIDLAND, TEXAS 79702
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 Sec. Twp. Rge. Is gas actually connected? When
L 5 19S 35E	

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'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded JULY 4, 1982	Date Compl. Ready to Prod. SEPT. 9, 1982	Total Depth 10,902'	P.B.T.D. 9555' B.P.					
Elevations (DF, RKB, RT, GR, etc.) 3902 KB 3886 GL	Name of Producing Formation BONE SPRINGS	Top Oil/Gas Pay 9453	Tubing Depth 9486'					
Perforations 9453-9490'			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17.5"	13-3/8", 54.4#		446'		420 sx C1 C			
12-1/4"	8-5/8", 32 & 24#		4,000'		1625 sx Howco Light			
7-7/8"	5-1/2", 17#		10,900'		420 sx - DV tool at			
7-7/8"	2-3/8" tbg		9,486'		6986. Cmt 1000 sx.			

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)

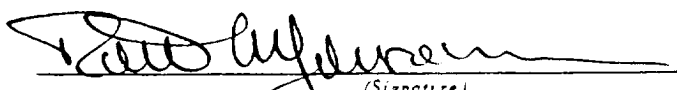
Date First New Oil Run To Tanks AUGUST 22, 1982	Date of Test SEPT. 9, 1982	Producing Method (Flow, pump, gas lift, etc.) FLOWING	
Length of Test 24 HOURS	Tubing Pressure 120#	Casing Pressure 0	Choke Size 32/64"
Actual Prod. During Test 436	Oil-Bbls. 436	Water-Bbls. 22	Gas-MCF 240

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.


(Signature)
PETROLEUM ENGINEER
(Title)
SEPTEMBER 13, 1982
(Date)

OIL CONSERVATION COMMISSION
APPROVED **SEP 15 1982**, 19
BY **Eddie W. Sean**
TITLE **OIL & GAS INSPECTOR**

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.

RECEIVED
SEP 14 1982
C.C.D.
HOBBS OFFICE