

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Ingram Oil & Gas, Inc.	
Address 2823 Diamond Shamrock Tower, L.B. 98, Dallas, Texas 75201	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

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 Federal '21C'	Well No. 1	Pool Name, Including Formation Young Wildcat-Bone Spring	Kind of Lease State, Federal or Fee Federal	Lease No. NM-65913
Location				
Unit Letter H : 1650 Feet From The North Line and 330' Feet From The East				
Line of Section 21 Township 18S Range 32E , 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"/> Koch Oil Company	Address (Give address to which approved copy of this form is to be sent) Box 3609, Midland, Texas 79702	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, Texas 79762	
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 21
	Twp. 18S	Rgn. 32E
	Is gas actually connected? Yes When 10/16/86	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Jerry W. Franklin
(Signature)
Agent
(Title)
10/30/86
(Date)

OIL CONSERVATION DIVISION

APPROVED **NOV 3 1986**, 19
BY ORIGINAL SIGNED BY **JERRY SEXTON**
DISTRICT I SUPERVISOR
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.

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 12/31/85	Date Compl. Ready to Prod. 8/20/86		Total Depth 11,942'			P.B.T.D. 9450'			
Elevations (DF, RKB, RT, GR, etc.) 3771' GR	Name of Producing Formation Bone Spring		Top Oil/Gas Pay 9340'			Tubing Depth 9180'			
Perforations 9340-9360' (1 SPF)						Depth Casing Shoe 11,920'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
17 1/2"	13 3/8"		411'			420 SX			
12 1/4"	8 5/8"		4445'			1115 SX			
7 7/8"	5 1/2"		11920'			1175 SX			
5 1/2"	2 7/8"		9180'						

Date First New Oil Run To Tanks 8/19/86	Date of Test 8/20/86	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 60 psi	Casing Pressure pkr	Choke Size
Actual Prod. During Test 52 bbls	Oil-Bbls. 30	Water-Bbls. 22	Gas-MCF 50

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size