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TRANSPORTER	OIL	
	GAS	
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
OFFICE O. C. C.
11 34 AM '67

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Shenandoah Oil Corporation
Address
406 Mutual Savings Building, Fort Worth, Texas 76102
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)
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
UNDESIGNATED
Lease Name **Ruth Terry Furneaux** Well No. **1** Pool Name, including Formation **Nadine (Drinkard)** Kind of Lease **State, Federal or Fee** Fee **Fee** Lease No. **-**
Location
Unit Letter **D** ; **660** Feet From The **North** Line and **660** Feet From The **West**
Line of Section **26** Township **19S** Range **38E** , NMPM, **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
The Permian Corporation Address (Give address to which approved copy of this form is to be sent)
P.O. Box 3119, Midland, Texas
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Negotiating Contract at this time 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 **D** Sec. **26** Twp. **19S** Rge. **38E** Is gas actually connected? **No** When **-**

IV. COMPLETION DATA
Designate Type of Completion - (X) Oil Well ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'tv. ☐ Diff. Res'tv. ☐
Date Spudded **8-28-66** Date Compl. Ready to Prod. **-** Total Depth **7868'** P.B.T.D. **7700'**
Elevations (DF, RKB, RT, GR, etc.) **3597'Gr, 3605'DF, 3606'KB-(Drinkard-Wichita-Albany)** Name of Producing Formation **6905'** Top Oil/Gas Pay **Short String 7155.61'**
Perforations **Drinkard - 8 holes from 6905-6986'** **Wichita Albany - 32 holes from 7287-7647'** **Long String 7270'**
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
11" 8-5/8" 24# J-55 1606' 300sx lit, 150sx reg
7-7/8" 5 1/2" 14# 15.5#, 17# J-55 7788' 1210sx pos 18% salt
2-1/16" J&L R-2 10Rd JCW tbq seated in Baker Model D pkr 7270'
2-1/16" J&L R-2 10Rd JCW tbq in Baker "J" Latch sub @ 7155'

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)
OIL WELL
Date First New Oil Run To Tanks **11-26-66** Date of Test **February 10, 1967** Producing Method (Flow, pump, gas lift, etc.) **Wells produced separately but commingled flow into tanks**
Length of Test **24 hrs.** Tubing Pressure **Drinkard 75 psi** Casing Pressure **Drinkard 350#** Choke Size **Drinkard 14/64"**
Wichita Albany 125# **Wichita Albany-pkr.** **Wichita Albany 34/64"**
Actual Prod. During Test **Drinkard 14.62** Oil-Bbls. **Drinkard 14.62** Water-Bbls. **Drinkard 2 BW** Gas-MCF **Drinkard 107MCFPD**
Wichita Albany 18.00 **W. Albany 18.00** **W. Albany Trace** **W. Albany 567MCFPD**
Request for one allowable only. Dual completion is not requested.
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 **-**

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.

Harold E. Bunker
(Signature)
Production Superintendent
(Title)
February 28, 1967
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY **Joe S. Ramsey**
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.