



LTR



Job separation sheet

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

PERMIT TO TRANSPORT OIL AND NATURAL GAS

Form C-104

Supersedes Old C-104 and C-110

Effective 1-1-65

I.

Operator	
BARBER OIL EXPLORATION, INC.	
Address	
2627 Tenneco Bldg., Houston, Texas 77002	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Southeast Lea Unit	1	Morrow	State, Federal or Fee State	OG3825
Location				
Unit Letter J ; 1980 Feet From The East Line and 1980 Feet From The South				
Line of Section 26 Township 20 S Range 35 E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Crown Central Pipeline Corp.	1010 Bank of Southwest Houston, Texas	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Llano, Inc.	Box 2215 Hobbs, New Mexico 88240	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	J	26
		20
		35E
	Is gas actually connected? When	
	Yes May 15, 1968	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X		X		X		X
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
8-31-74	9-8-74	14,644	13,275					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3,679 G L	Morrow	12,822	12,709					
Perforations 13,191 - 217, 12,952 - 960, 12,912 - 914, 12,888 - 894,			Depth Casing Shoe					
12,866 - 888, 12,842 - 846,								
TUBING, CASING, AND CEMENTING RECORD See Attached								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2	13 3/8	835	500					
12 1/4	9 5/8	5,502	700					
8 3/4	7"	12,090	1,115					
6"	5" liner	11,846 - 14,556	317					

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	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
100	24	27	46° APF
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
AOF 218 MCF/D	3,895	0	8/64

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.

BARBER OIL EXPLORATION, INC.

T. P. McConn

(Signature)

Vice President

(Title)

October 14, 1974

(Date)

OIL CONSERVATION COMMISSION

APPROVED

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BY

TITLE

SUPERVISOR

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