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

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-110
Effective 1-1-65

I. Operator
North American Royalties, Inc.

Address
200 Wilco 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)
**CASINGHEAD GAS MUST NOT BE
FLAGGED AFTER 7-1-80
UNLESS AN EXCEPTION TO R-4070
IS OBTAINED from U. S. G. S.**

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Nadine Federal Well No. 1 Pool Name, Including Formation Nadine Drinkard (Drinkard) Kind of Lease State, Federal or Fee Federal Lease No. 10787

Location
Unit Letter D 660 Feet From The North Line and 660 Feet From The West
Line of Section 23 Township 19-S Range 38-E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
Summa Energy Corporation Address (Give address to which approved copy of this form is to be sent)
P.O. Box 1231, Lovington, N.M. 88260

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
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. 23 Twp. 19S Rge. 38E 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 <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 12/27/79	Date Compl. Ready to Prod. 3/27/80		Total Depth 7950'		P.B.T.D. 7720'			
Elevations (DF, RKB, RT, GR, etc.) GR 3602'	Name of Producing Formation Drinkard		Top Oil/Gas Pay 6750'-7669'		Tubing Depth 7649' KB			
Perforations					Depth Casing Shoe 7945' KB			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	16"	401'	800 sx Class "C"
11"	7-5/8"	4068'	2000 sx-Lo Den. Gel;
			300 sx Class "C"
6-3/4"	4-1/2"	7945'	590 sx Class "C"

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 4/11/80	Date of Test 4/29/80	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 25	Oil-Bbls. 22	Water-Bbls. 3	Gas-MCF 31

GAS WELL

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

Kenneth R. South
(Signature)

District Engineer

(Title)

May 9, 1980

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

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.