

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

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CLERK	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator  
**ELLIOTT OIL COMPANY**

Address  
**Box 1355, Roswell, New Mexico 88201**

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)  
**Littman Unit terminated  
October 1, 1970**

If change of ownership give name and address of previous owner  
**Sohio Petroleum Co. - Unit Operator**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Wylie</b>	Well No. <b>3</b>	Pool Name, including Formation <b>Littman San Andres</b>	Kind of Lease State, Federal or Free <b>Fed. L.C.</b>	Lease No. <b>069048</b>
Location Unit Letter <b>K</b> ; <b>1650</b> Feet From The <b>S</b> Line and <b>1650</b> Feet From The <b>W</b>				
Line of Section <b>9</b> Township <b>21S</b> Range <b>38E</b> , NMPM, <b>Lea</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <b>None - Injection Well</b>	Address (Give address to which approved copy of this form is to be sent)
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

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) <b>Injection Well</b>	Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input 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 <b>3/7/55</b>	Date Compl. Ready to Prod. <b>3/23/55</b>	Total Depth <b>4359</b>	P.B.T.D. <b>- - -</b>
Elevations (DF, RKB, RT, GR, etc.) <b>3576</b>	Name of Producing Formation <b>San Andres</b>	Top Oil/Gas Pay <b>4327</b>	Tubing Depth <b>4300</b>
Perforations <b>Open hole</b>			Depth Casing Shoe <b>4327</b>
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE <b>10"</b>	CASING & TUBING SIZE <b>8 5/8"</b>	DEPTH SET <b>1621</b>	SACKS CEMENT <b>750</b>
<b>6 3/4"</b>	<b>5 1/2"</b>	<b>4327</b>	<b>350</b>

V. TEST DATA AND REQUEST FOR ALLOWABLE

(Test must be after recovery of total volume of lost 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
Accum. Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MMCF

GAS TEST

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

**ELLIOTT OIL COMPANY**

Owner

(Signature)

(Title)

Sept. 29, 1970

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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DEC 1 1970

OIL CONSERVATION COMM.  
HOODS. R. C.