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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER - OIL	
GAS	
OPERATOP	

NEW MEXICO OIL CONSERVATION COMMISSION

[SANTA FE	REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-110		
	FILE		AND	Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL GA	IŞ		
	LAND OFFICE	•				
	TRANSPORTER OIL					
	GAS			•		
	OPERATOP OFFICE					
1.	PRORATION OFFICE Operator					
	SOLAR OIL COMPA	NY .		·		
	Address					
	Box 5114	Midland, Texas 79701				
	Reason(s) for filing (Check proper box) Other (Please explain)					
	New Well	Change in Transporter of:				
	Recompletion	Oil Dry Gas	·			
	Change in Ownership	Casinghead Gas Condens	sate			
	If change of expension give name					
	If change of ownership give name and address of previous owner					
	λ , λ / λ / λ					
11.	DESCRIPTION OF WELL AND I	LEASE	rmetion Kind of Lease	Lease No.		
		Well No. Pool Name, Including Fo	R-373 State, Federal	1		
	Gulf Sarkeys	2 Undesignated	UFINKATO	166		
	- 100	North	and 2030 Feet From T	West		
	Unit Letter F : 198	O Feet From The North Line	e and 2030 Feet From Ti	ne		
	25 Town	mship 21S Range 3	7E , NMPM, L	ea County		
	Line of Section 25 Tow	manip 210 Runge 2	7 1 1 1 1 1 1			
ш	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s			
111.	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approve	ed copy of this form is to be sent)		
	Admiral Crude Compan		Box 1713 Midland, T	exas		
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which approve	ed copy of this form is to be sent)		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When			
	give location of tanks.	C/F : 25 21S : 37E	No .			
	If this production is commingled wit	th that from any other lease or pool,	give commingling order number:			
	COMPLETION DATA					
	Designate Type of Completion	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
			X	P.B.T.D.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	1		
	10-25-68	Name of Producing Formation	7400 ' Top Oil/Gas Pay	7360' Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)	•	-	6847'		
	3405.61 GR	Drinkard	6419'	Depth Casing Shoe		
				7400'		
	6849-6475' TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT					
	13-3/4"	10-3/4"	863'	425_sx		
	9-5/8"	7-5/8"	7400'	800 sx		
	7.37.0	2-3/8"	6847'			
		2-3/8"	7114'			
V.	TEST DATA AND REQUEST FO	OR ALLOWARLE (Test must be a	fter recovery of total volume of load oil a	and must be equal to or exceed top allow-		
••	OII. WELL Date First New Oil Run To Tanks Date of Test Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)					
11-30-68 1-11-69 Pumping Length of Test Tubing Pressure Casing Pressure Choke Size		Choke Size				
	1	Tubing Pressure				
	24 hrs	Oil-Bbis.	40 Water-Bbls.	Gas-MCF		
	Actual Prod. During Teet 206 BF	165	41	218		
	1		<u> </u>			
	CAC 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		
VI	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION		
¥ 1.	I hereby certify that the rules and regulations of the Oil Conservation APPROVED					
				/		
Commission have been complied with and that the information given		al A Dies				
	above is true and complete to the best of my knowledge and belief. TITLE This form is to be filed in compliance with RULE 1104 If this is a request for allowable for a newly drilled or or well, this form must be accompanied by a tabulation of the compliance with RULE 111.					
			<u>/</u>			
			compliance with RULE 1104.			
			at it is to a propert for allowable for a newly drilled or deepened			
			wind un m impuration of file designed.			
	Production Clerk	-	tests taken on the well in accor	wance with NULE !!!!		
FIOUUCLION CIEIK			All sections of this form must be filled out completely for allow-			

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.

(Title)

January 16, 1969