

SANTA FE			
FILE			
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

Operator Adobe Oil & Gas Corporation	
Address 1100 Western United Life Bldg., Midland, TX 79701	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change In Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change In Ownership <input type="checkbox"/>	Casinghead Gas <input checked="" 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 Linda Federal	Well No. 1	Pool Name, including Formation Warren (Tubb)	Kind of Lease State, Federal or Fee Fed.	Lease No. NM 23777
Location Unit Letter <u>K</u> ; <u>1980</u> Feet From The <u>south</u> Line and <u>1980</u> Feet From The <u>west</u>				
Line of Section <u>23</u> Township <u>20-S</u> Range <u>38-E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119 Midland, TX 79701	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) Bldg. of the Southwest Midland, TX 79701	
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 23
	Twp. 20	Rge. 38
	Is gas actually connected? <u>YES</u> When <u>3/3/78</u>	

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	New Well <input type="checkbox"/>	XXXXX <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input checked="" type="checkbox"/>
Date Spudded 9/27/77	Date Compl. Ready to Prod. 11/27/77	Total Depth 7010'		P.B.T.D. 6952'					
Elevations (DF, RKB, RT, GR, etc.) 3563 GIM	Name of Producing Formation Tubb	Top Oil/Gas Pay		Tubing Depth 6576'					
Perforations 6603 - 6726' (12 holes)		Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE 7-7/8	CASING & TUBING SIZE 5-1/2 15.50# K-55		DEPTH SET 7010		SACKS CEMENT 400 SX				
	2-1/16		6576						

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 11-20-77	Date of Test 11-25-77	Producing Method (Flow, pump, gas lift, etc.) flow	
Length of Test 24	Tubing Pressure 125	Casing Pressure -	Choke Size 20-64"
Actual Prod. During Test 182 BO	Oil - Bbls. 182	Water - Bbls. 0	Gas - MCF 225

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.

(Signature)
Dist. Prod. Mgr.
(Title)
April 6, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 10 1978, 19
Orig. Signed By Jerry Sexton
BY Dist 1, Supr.
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.

RECEIVED

APR 2 - 1978

OIL CONSERVATION COMM.
DOBBS, N. M.