

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Supersedes Old C-104 and C-110
Effective 1-1-65

SANITARY	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator Adobe Oil & Gas Corporation	
Address 1100 Western United Life Bldg., Midland, TX 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Re-Entry
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner _____

Lease Name Linda Federal		Well No. 1	Pool Name, Including Formation Blinebry Oil & Gas	Kind of Lease State, Federal or Fee Fed.	Lease No. NM 23777
Location Unit Letter K ; 1980 Feet From The south Line and 1980 Feet From The west					
Line of Section 23 Township 20-S Range 38-E , NMPM, Lea County					

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)				
The Permian Corporation		P. O. Box 3119 Midland, TX 79701				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)				
El Paso Natural Gas Co.		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? YES	When 3/3/78

If this production is commingled with that from any other lease or pool, give commingling order number: _____

Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Re-entry <input checked="" type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res' <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 Blinebry	Top Oil/Gas Pay 5920'		Tubing Depth 5888'					
Perforations 5920-6174' (16 holes)		Depth Casing Shoe 7010'							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
12-1/4	7-5/8	2134		900 sx (surface)					
12-1/4	8-5/8	2100 - 3000		entire interval cemented					
7-7/8	5-1/2	7010		400 sx top @ 4600'					
	2-1/16	5888							

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 26	Tubing Pressure 175	Casing Pressure -	Choke Size 14/64"	
Actual Prod. During Test 45	Oil - Bbls. 45	Water - Bbls. 0	Gas - MCF 640	

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 _____, 1978

BY _____
Orig. Signed By
Jerry Sexton
TITLE _____
Dist. L. Supv.

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 filled for each pool in multiply completed wells.

RECEIVED

MAY - 1973

U. S. CONSERVATION COMM.
SANDS, N. M.