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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATION	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-101 and C-11
Effective 1-1-65

Operator Texas Pacific Oil Company, Inc.	
Address P. O. Box 4067, 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 ☐

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name State "A" A/c-2	Well No. 63	Pool Name, including Formation Jalmat	Kind of Lease State, Federal or Fee State	Lease No. NM2A
Location				
Unit Letter C	990	Feet From The north	Line and 2310	Feet From The west
Line of Section 9	Township 22-S	Range 36-E	NMFM, Lea	County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ None	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Jal, New Mexico 88250
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? No When

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well X	New Well X	Workover	Deepen	Plug Back	Same Res'v. Diff. Res'
Date Spudded 5-29-77	Date Compl. Ready to Prod. 9-2-77	Total Depth 3700'	P.B.T.D. 3638'				
Elevations (DF, RKB, RT, GR, etc.) 3569' GR	Name of Producing Formation Yates-Seven Rivers	Top Oil/Gas Pay 3328	Testing Depth 3580'				
Perforations 3183'-3584'			Depth Casing Shoe 3700'				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	807'	500 SX.
7 7/8"	5 1/2 "	3700'	1425 SX.

IV. 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D AOF-836	Length of Test 4 Hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (flow, back pr.)	Tubing Pressure (lb/in ²) 184	Casing Pressure (lb/in ²)	Choke Size 3/4"

V. 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.

W. J. McClintock
(Signature)
District Operations Superintendent
(Title)

9-14-77

OIL CONSERVATION COMMISSION

APPROVED _____, 19__

BY John W. Runyan
Geologist

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 deviate tests taken on the well in accordance with RULE 111.

All portions 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 lease well name or number, or transporter, or other such change of conditions.