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

OCT 22 2 50 PM '65

Socony Mobil Oil Company, Inc.

Box 1800, Hobbs, New Mexico

Reason(s) for filing (Check proper box)

New Well

☒

Change in Transporter of:

Oil

☐

Dry Gas

☐

Recompletion

☐

Casinghead Gas

☐

Condensate

☐

Change in Ownership

☐

Other (Please explain)

If change of ownership give name and address of previous owner

H. DESCRIPTION OF WELL AND LEASE

Well No.	Pool Name, Including Formation	Kind of Lease
2	Drinkard	State, Federal or Fee
Fee		
Location		
Unit Letter	660	Feet From The South Line and 660 Feet From The West
Line of Section	24	Township 21-S Range 37-E
Lea		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"/>	Address (Give address to which approved copy of this form is to be sent)
Texas New Mexico Pipe Line Company		Box 1510, Midland, Texas
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)
Skelly Oil Company		Box 1135, Eunice, New Mexico
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	L	24
	Twp.	Rge.
	21-S	37-E
Is gas actually connected?	When	
Yes	10-18-65	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
X			X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
10-5-65	10-18-65	7245	6900					
Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth						
Drinkard	Drinkard	6493	6597					
Formations	6535, 39, 47, 49, 51, 55, 59, 71, 74, 6582, 87, 91, 98, 6493, 98, 6504; 6508, 11, 15, 18, 20, 22, 27, 29 w/1 32F (Total 24 holes)	Depth Casing Shoe	7225					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8"	352	w/375 sx, circ.					
12-1/4"	9-5/8"	3160	w/1760 sx, circ.					
8-3/4"	7"	6700	w/940 sx					
6-1/8"	5"	7245	w/90 sx					

V. TEST DATA AND REQUEST FOR ALLOWABLE

(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.)
10-17-65	10-19-65	Flow
Length of Test	Tubing Pressure	Casing Pressure
24 hours	225#	Pkr.
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.
288	288	0
		Gas-MCF
		212

Grav. 36.3° @ 60°, GOR 737/1

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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.

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 Sections I, II, III, and VI only 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.

Acting Group Supervisor

October 22, 1965