

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

SOLAR OIL COMPANY

Box 996, Midland, Texas

Reasons for filing (check proper box)

New Well ☐

Recompletion ☐

Change in Ownership ☐

Change in Transporter of:

Oil ☐

Casinghead Gas ☐

Dry Gas ☐

Condensate ☐

Other (Please explain)

Change of ownership give name
and address of previous owner

Lease No. 1

Lease Range

Nancy

Well No. Pool Name, Including Formation

1

Wantz Abo

Kind of Lease

State, Federal or Fee

Fee

Lease No.

Location

Unit Letter N 600 Feet From The South Line and 1980 Feet From The West

Section 24 Township 21-S Range 37-E, NMPLM, Lea County

NAME OF AUTHORIZED TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐

or Condensate ☐

Admiral Cruise Oil

Address (Give address to which approved copy of this form is to be sent)

Box 1713, Midland, Texas

Name of Authorized Transporter of Casinghead Gas ☐

or Dry Gas ☐

Skelly Oil Company

Address (Give address to which approved copy of this form is to be sent)

Box 993, Midland, Texas

Is well actually connected or liquid,
give location of tanks

Unit

Sec.

Twp.

Range

Is gas actually connected?

When

N

24

21-S

37-E

No

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

NAME OF WELL

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					
Date opened	5-7-69	Date Com'd. Ready to Prod.	5-22-69	Total Depth	7450'	P.B.T.D.	7406	
Completions (DF, VCB, etc.)	3423 GR	Name of Producing Formation	Abo	Top Oil/Gas Pay	6876	Tubing Depth	7384'	
Perforations	7384'-6929'					Depth Casing Shoe	7450'	

TUBING, CASING, AND CEMENTING RECORD

SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
2	8-5/8"	876'	450
7-7/8	5"	7450'	700
	2-3/8"	7384'	

VI. TEST WELL 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	9-12-69	Date of Test	9-25-69	Producing Method (Flow, pump, gas lift, etc.)	Pump
Length of Test	24 hrs.	Tubing Pressure	---	Casing Pressure	---
Actual Prod. During Test	158 BF	Oil - bbls.	32	Water - Bbls.	126
				Gas - MCF	21.5

Length of Test	---	Bbls. Condensate/MMCF	---	Gravity of Condensate	---
Tubing Pressure (Shut-in)	---	Casing Pressure (Shut-in)	---	Choke Size	---

VII. CERTIFICATION OF COMPLIANCE

I, the undersigned, do hereby certify that the information given above is true and complete to the best of my knowledge and belief.

M. J. Smith
(Signature)

Production Clerk

(Title)

Dec. 6, 1969

(Date)

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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.