CONFIDENTIA

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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALL OWABLE

Form C-104 Supersedes Old C-104 and C-110

	SANTAFE	REQUEST	FUR ALLOWABLE	Effective 1-1-65
	FILE	1	AND	
	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
	LAND OFFICE			
	RANSPORTER			
	GAS			
	OPERATOR			
ì.	PRORATION OFFICE			
	्रविधार्मार्थ			
	Hunt Industries			
	Artheyo			
	2500 First National Bank Building, 2000			
	Reason(s) for filing (Check proper box)		Other (Please explain)	
	Liew Well Change in Trunsporter of:		4 000 harrels condensate -	
	rtecongletion	Oil Dry Ga	Testing All	ı
	Them je in Ownership	Casinghead Gas Conden	sate lesting Air	owabic
	If change of ownership give name and address of previous owner			
iL.	DESCRIPTION OF WELL AND	LEASE	Vi Vi	Kind of Lease
	Lease Name	Well Mo. Foot Max	me, Including Formation	State, Federal or Fee State
	State 15	1 Osudo	o, South (Morrow Gas)	State, 1 edetat ct 1 cc
	Location			2
	Unit Letter N ; 198	80 Feet From The West Lin	e and 990 Feet From	The South
				_
	Line of Section 15 , Tov	wnship 21-S Range	35-E , NMPM,	Lea County
Ш.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent)			
	Name of Authorized Transporter of Oil			
	The Permian Co	rporation	Box 3119, Midland, Tex	(as /5/01
	Cane of Authorized Transporter of Can	singheud Gas 🔲 💮 or Dry Gas 🦳	Address (Give address to which appro	eved copy of this form is to be sent)
			}	
	han liquide	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en
	It well produces oil or liquids, give location of tanks.	N 15 21-S 35-E	No	
	To a sign of a s	th that from any other lease or pool,	give commingling order number:	
w	COMPLETION DATA	th that from any other rease or poor,		
,,,		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completion		x	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	12-29-75	Not Determined	12,459'	12,264'
	Fool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	South Osudo	Morrow	11,981'	11,094'
	Perforations			Depth Casing Shoe
	11 981-11.997'	and 12,122-12,135'		12,458'
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	17-1/2"	13-3/8"	398'	407
	17-1/4"	9-5/8"	5,499'	750
	9-5/4"	7!!	11,449'	400
	8-5/4" 6-1/8"	4-1/2" Liner	m = 11 000 = 0 m 17 // 5	8 175
	TOST DATA AND PROUEST F	OR ALLOWARIE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-
`	OIL WELL	able for this de	, , , , , , , , , , , , , , , , , , , ,	
	Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
			,	
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
	CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION COMMISSION
٠.	CERTIFICATE OF COMPENS			
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED , 19, 19	
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		·	
			TITLE	
	\mathcal{N}_{α}		This form is to be filed in compliance with RULE 1104.	
	SIKOLE		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	
	SIKOL	<i>e</i>	If this is a request for allo	enied by a tabulation of the deviation
	(Sign	edure)	woll this form must be accomp	anied by a tabulation of the deviation
	District Super	intendent	well, this form must be accompated tests taken on the well in accompany. All sections of this form many	anied by a tabulation of the deviation or the deviation or the with RULE 111. ust be filled out completely for allow-
		intendent	well, this form must be accompated tests taken on the well in accompated with a sections of this form mable on new and recompleted w	anied by a tabulation of the deviation or the deviation of the deviation o
	(T) May 10 1976		well, this form must be accompletests taken on the well in accompleted well and recompleted well on new and recompleted well out Sections I II III	anied by a tabulation of the deviation or the deviation or the with RULE 111. ust be filled out completely for allow-

Separate Forms C-104 must be filed for each pool in multiply completed wells.