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

I. Operator
Millard Deck
Address
P. O. Box 1047, Eunice, New Mexico 88231
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
CASINGHEAD GAS MUST NOT BE
FLARED AS OF 7-2-77
UNLESS AN EXCEPTION TO RULE
IS OBTAINED
If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE
Lease Name L. W. White "A" Com Well No. 1 Pool Name, including Formation Eumont Yates 7-Rivers Q. Kind of Lease State, Federal or Fee Fee Fee Lease No. _____
Location
Unit Letter B ; 1980 Feet From The East Line and 660 Feet From The North
Line of Section 2 Township 21 South Range 35 East , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Charter International Oil Company Address (Give address to which approved copy of this form is to be sent)
P. O. Box 5008, Houston, Texas 77012
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Phillips Petroleum Company Address (Give address to which approved copy of this form is to be sent)
4th & Washington, Odessa, Texas 79760
If well produces oil or liquids, give location of tanks. Unit B Sec. 2 Twp. 21S Rge. 35E Is gas actually connected? No When _____

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) X Oil Well X Gas Well _____ New Well X Workover _____ Deepen _____ Plug Back _____ Same Resv. _____ Diff. Resv. _____
Date Spudded 2-8-77 Date Compl. Ready to Prod. 3-8-77 Total Depth 4000' P.B.T.D. 3997'
Elevations (DF, RKB, RT, GR, etc.) 3565.5' GL Name of Producing Formation Seven Rivers Top Oil/Gas Pay 3642' Tubing Depth 3900'
Perforations 3642' - 3795' Depth Casing Shoe 4000'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE 11" CASING & TUBING SIZE 8 5/8" 24# DEPTH SET 312' SACKS CEMENT 165 Sxs Class C Cement
7 7/8" 4 1/2" 11.5# 4000' w/2% CaCl circulated to pit
Floccle; 275 Sxs Class C 5# Salt, 5/10
CFR-2, 1 1/4" Floccle

V. 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 3-8-77 Date of Test 3-9-77 Producing Method (Flow, pump, gas lift, etc.) Pump
Length of Test 24 hours Tubing Pressure -- Casing Pressure -- Choke Size --
Actual Prod. During Test Oil-Bbls. 14 Water-Bbls. 0 Gas-MCF 20

GAS WELL
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.
Millard Deck
(Signature)
Owner-Operator
(Title)
4-27-77
(Date)
OIL CONSERVATION COMMISSION
APPROVED MAY 2 1977, 19_____
BY Jerry S. [Signature]
TITLE SUPERVISOR DISTRICT I
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.

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11-2 1977

U.S. DEPT. OF JUSTICE COMM.
HOBBS, L. L.