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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
Alpha Twenty-One Production Company
Address
2100 First National Bank Building, 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 ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lansford	Well No. 1	Pool Name, Including Formation Hare San Andres R-6698	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter N ; 1650 Feet From The West Line and 660 Feet From The South Line of Section 21 Township 21S Range 37E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 175, Artesia, New Mexico 88210			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, Texas 79978			
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 21	Twp. 21S	Rge. 37E
Is gas actually connected?		When		
No				

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 1-12-81	Date Compl. Ready to Prod. 2-17-81		Total Depth 4300		P.B.T.D. 4172			
Elevations (DE, RKB, RT, CR, etc.) 3476 G. L.	Name of Producing Formation San Andres		Top Oil/Gas Pay 4015		Tubing Depth 3980			
Perforations 4015, 4016, 4017, 4018, 4052, 4091, 4094, 4115, 4126, 4128, 4130 - 11 Perfs. (.50 Dia.)					Depth Casing Shoe 4300			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8-5/8		417		300 Sx.Cl.C. 2% Cacl. Cl			
7-7/8	5-1/2		4300		600 Sx.Cl.C. 3% Econolite & 350 Sx.50-50 Pozmix, Circulated			

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	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 300	Length of Test 24 Hrs.	Bbls. Condensate/MMCF 7	Gravity of Condensate 31
Testing Method (pitot, back pr.) Pitot	Tubing Pressure (Shut-in) 260	Casing Pressure (Shut-in) 290	Choke Size 48/64

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.

Tommy Phipps (Signature)
Executive Vice President
(Title)
April 16, 1981

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 allow-