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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
Operator
ALBERT GACKLE, OPERATOR
Address
P. O. BOX 2038, HOBBS, NEW MEXICO 88240

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name E. F. KING	Well No. 2	Pool Name, including Formation LANGLIE-MATTIX 7 RIVERS QUEEN	Kind of Lease State, Federal or Fee Fee	Lease No.
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Location
Unit Letter **I** ; **2310** Feet From The **South** Line and **990** Feet From The **East**
Line of Section **12** Township **23S** Range **36E** , NMPM, **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"/> TEXAS-NEW MEXICO PIPELINE	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 2528, HOBBS, N.M. 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PETRO-LEWIS CORPORATION c/o PARTNERSHIP PROP.,	Address (Give address to which approved copy of this form is to be sent) BOX 61489, HOUSTON, TX, 77208

If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? 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)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
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Date Spudded 12-22-61	Date Compl. Ready to Prod. 1-1-62	Total Depth 3770	P.B.T.D. 3740
Elevations (DF, RKB, RT, GR, etc.) 3394 DF	Name of Producing Formation 7 RIVERS QUEEN	Top Oil/Gas Pay 3614	Tubing Depth 3600
Perforations 3614-19, 32-36, 39-43, 45-52, 56-82			Depth Casing Shoe 3769

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11	8 5/8	292	200
6 3/4	4 1/2	3769	1200
	2	3600	

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.

(Signature)
Agent
(Title)
May 23, 1979
(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAY 25 1979**, 19____

BY **Jerry Sexton**
Orig. Signed by
Dist 1, Sup^v

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

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MAY 24 1979

**OIL CONSERVATION COMM.
HOBBS, N. M.**