

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

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

I. Operator
WOLFSON OIL COMPANY

Address
3206 REPUBLIC NATIONAL BANK TOWER, DALLAS, TEXAS 75201

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

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☐ Gashead Gas ☐ Condensate ☐

Change in Ownership ☒

If change of ownership give name and address of previous owner
HUMBLE OIL & REFINING COMPANY, BOX 2347, HOBBS, NEW MEXICO

II. DESCRIPTION OF WELL AND LEASE

Lease Name NEW MEXICO STATE AA	Well No. 5	Pool Name, including Formation LANGLIE MATTIX	Kind of Lease State, Federal or Free STATE
Location			
Unit Letter G	1980	Feet From Line NORTH	Line and 1980
Line of Section 22	Township 23-S	Range 36-E	Feet From Line EAST
			County LEA

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 PIPE LINE COMPANY	Address (Give address to which approved copy of this form is to be sent) BOX 1510, MIDLAND, TEXAS					
Name of Authorized Transporter of Gashead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS PETROLEUM COMPANY	Address (Give address to which approved copy of this form is to be sent) BARTLESVILLE, OKLAHOMA					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 22	Twp. 23-S	Rge. 36-E	Is gas actually connected? YES	When 1-15-60

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	Stim. Res'tv.	Diff. Res'tv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth		F.R.T.D.					
Pool	Name of Producing Formation	Top Oil/Gas Pay		Timing Depth					
Perforations				Depth-Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				

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)

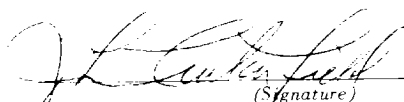
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Taking Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-M MCFD	Length of Test	Bbls. Condensate MCFD	Gravity of Condensate
Testing Method (pitot, back pr.)	Taking Pressure	Casing Pressure	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)

OFFICE MANAGER

(Title)

AUGUST 20, 1968

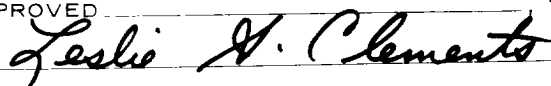
(Date)

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 Sections I, II, III, and VI only 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