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	GAS	
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NEW MEXICO OIL CONSERVATION COMMISS.
REQUEST FOR ALLOWABLE
AND APPROVED BY O.C.C.
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
Mar 20 3 52 PM '67

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Cities Service Oil Company
Address
P. O. Box 69 - 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 Brunson B	Well No. 1	Pool Name, Including Formation Tubb Oil Tubb	Kind of Lease State, Federal or Fee Fee	Lease No. -
Location Unit Letter 1 ; 1980 Feet From The South Line and 810 Feet From The East Line of Section 4 Township 22S Range 37E , 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 Company	Address (Give address to which approved copy of this form is to be sent) Box 1510 Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum	Address (Give address to which approved copy of this form is to be sent) Box 1197 Eunice, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit 1	Sec. 4	Twp. 22S	Rge. 37E	Is gas actually connected? Yes	When 3-19-67

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	New Well	Workover	Deepen	Plug Back <input checked="" type="checkbox"/>	Same Res'v.	Diff. Res'v.
Date 2-27-67 Resuspended 2-27-67	Date 3-19-67 Ready to Prod. 3-19-67	Total Depth 7625	P.B.T.D. 6350					
Elevations (DF, RKB, RT, GR, etc.) GR 3447	Name of Producing Formation Tubb	Top Oil 5927 Pay 5927	Tubing Depth 6080					
Perforations 1-1/2" hole each @ 5927, 5986, 6047, 6062, 6108, 6133, 6175, 6218			Depth Casing Shoe 7468					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
(See original well record)								

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 3-6-67	Date of Test 3-19-67	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 15#	Casing Pressure (Packer)	Choke Size 1"
Actual Prod. During Test	Oil - Bbls. 6	Water - Bbls. 8 (Load)	Gas - MCF 135.1

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.

ORIGINAL SIGNED
C. W. BRANSON

(Signature)

District Clerk

(Title)

3-20-67

(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 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.