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

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

Operator Antrade Moss Corporation	
Address Drawer "D", Monument, New Mexico 88265	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐
Recompletion ☐	
Change in Ownership ☐	

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Blinobry Gas	Well No. 2	Pool Name, including Formation Blinobry Gas	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location Unit Letter <u>K</u> : <u>2009</u> Feet From The <u>South</u> Line and <u>1911</u> Feet From The <u>West</u> Line of Section <u>15</u> Township <u>22-S</u> Range <u>37-E</u> , NMPM, Loc _____ County _____					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent) Box 2648, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent) Box 2300, Midland, Texas 79701
If well produces oil or liquids, give location of tanks.	Unit <u>K</u> Sec. <u>15</u> Twp. <u>22</u> Rge. <u>37</u> Is gas actually connected? <u>No</u> When _____

If this production is commingled with that from any other lease or pool, give commingling order number: PC-430

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		X		X
Date-Spacer WORKOVER 3-17-75	Date Compl. Ready to Prod. 3-27-75		Total Depth 6470'		P.B.T.D. 6200'			
Elevations (DF, RKB, RT, GR, etc.) 3395' DF	Name of Producing Formation Blinobry		Top Oil/Gas Pay 5483'		Tubing Depth 6187'			
Perforations 2 Shocks at: 5483' 5506' 5510' 5514' 5542' 5570' 5586'			5483' 5506' 5510' 5514' 5542' 5570' 5586'		Depth Casing Shoe 6470'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17"	13-3/8"		191'		200 Sx.			
11"	8-5/8"		2775'		11200 Sx.			
7-3/8"	5-1/2"		6470'		500 Sx.			

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)

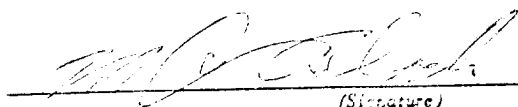
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 550 MCF	Length of Test 24 Hrs.	Bbls. Condensate/MMCF 0	Gravity of Condensate -
Testing Method (pilot, back pr.) Back Pr.	Tubing Pressure (Shut-in) 850#	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)

Surveyor, Admin. Services

(Title)

April 25, 1975

(Date)

OIL CONSERVATION COMMISSION

APPROVED

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 110.

All sections of this form must be filled out completely for allowables 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