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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 Old C-101 and C-111  
Effective 1-1-65

PRODUCER  
CROSS TIMBERS PRODUCTION COMPANY  
Address  
810 Houston Street, Suite 2000, Fort Worth, TX 76102  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Incompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name and address of previous owner  
Crown Central Petroleum Corporation  
4000 N. Big Spring, Suite 213, Midland, TX 79705

DESCRIPTION OF WELL AND LEASE  
Lease Name  
DANGLADE  
Well No. 1 Pool Name, including Formation  
Tubb Oil & Gas  
Kind of Lease  
State, Federal or Fee Fee  
Location  
Unit Letter B 660 Feet From The North Line and 1980 Feet From The East  
Line of Section 24 Township 22S Range 37E, NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
Shell Pipeline Company  
Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 1910, Midland, TX 79702  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
Warren Petroleum Company  
Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 1197, Eunice, NM 88231  
If well produces oil or liquids, give location of tanks.  
Unit B Sec. 24 Twp. 22S Rge. 37E  
Is gas actually connected? Yes When 8-10-59

If this production is commingled with that from any other lease or pool, give commingling order number: DHC-304

COMPLETION DATA  
Designate Type of Completion - (X)  
Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.  
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.  
Pool Name of Producing Formation Top Oil/Gas Pay Tubing Depth  
Perforations Depth Casing Shoe  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

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 Casing Pressure Choke Size

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.  
Vaughn O. Vennerberg, II  
Land Manager  
12-31-87  
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.