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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-104 and C-11  
Effective 1-1-65

CROSS TIMBERS PRODUCTION COMPANY

Address  
810 Houston Street, Suite 2000, Fort Worth, TX 76102

Reason(s) for filing (Check proper box)

New Well ☐ Replete in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinthead 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	DANGLADE	Well No.	1	Pool Name, Including Formation	Blinebry 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

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	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 Casinthead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 commingling with that from any other lease or pool, give commingling order number: DHC-304

IV. 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			

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	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.

Vaughn O. Vennerberg, II  
(Signature)  
Land Manager

12-31-87  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 25 1988, 19

BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT SUPERVISOR

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.