

CONTRIBUTION	
TAXES	
U.S.	
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-  
Effective 1-1-65

I. **GRACE PETROLEUM CORPORATION**  
Address: **P. O. Drawer 2358, Midland, Texas 79702**  
Reason(s) for filing (check appropriate box)  
New well ☐ Change in Terms ☐ Lease expiration ☐  
Production ☐ Oil ☐ Gas ☐  
Change in Ownership ☒ (Specify previous owner)  
If change of ownership give name and address of previous owner: **Cleary Petroleum Corporation, P. O. Drawer 2358, Midland, Tx. 79702**

II. **DESCRIPTION OF WELL AND LEASE**  
Lease Name: **Matkins** Lease No.: **PC 466**  
Location: **2 Jalmat Yates (7 Rivers)**  
Unit Letter: **0** **715** Feet from the **South** **1923** Feet from the **East**  
Line of Section: **15** Township: **23-S** Range: **36-E** County: **Lea**

III. **DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**  
Name of Authorized Transporter of Oil: ☒ **Texas-New Mexico Pipe Line Co.**  
Name of Authorized Transporter of Gas: ☒ **Phillips Petroleum Company**  
If well produces oil or liquids, give location of tanks: **0 15 23-S 36-E**  
If this production is commingled with that from any other lease, give commingling order number: **Yes**  
Address to which copies of this form are to be sent: **P. O. Box 1510, Midland, Texas 79702**  
Address to which copies of this form are to be sent: **Fourth & Washington, Odessa, Texas 79760**

IV. **COMPLETION DATA**  
Designate Type of Completion - (X) ☒ **PRODUCER**  
Date Spudded: \_\_\_\_\_ Date Completed: \_\_\_\_\_  
Elevations (DIP, RAB, RT, GR, etc.): \_\_\_\_\_ Name of Producing Formation: \_\_\_\_\_  
Perforations: \_\_\_\_\_  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE: \_\_\_\_\_ CASING & TUBING SIZE: \_\_\_\_\_ DEPTH SET: \_\_\_\_\_ SACKS CEMENT: \_\_\_\_\_

V. **TEST DATA AND REQUEST FOR ALLOWABLE**  
OIL WELL  
Date First New Oil Run To Tanks: \_\_\_\_\_ Date of Test: \_\_\_\_\_  
Length of Test: \_\_\_\_\_ Tubing Pressure: \_\_\_\_\_  
Actual Prod. During Test: \_\_\_\_\_ Oil-Basis: \_\_\_\_\_  
GAS WELL  
Actual Prod. Test-MCF/D: \_\_\_\_\_ Length of Test: \_\_\_\_\_  
Testing Method (pilot, back pr.): \_\_\_\_\_ Tubing Pressure (Shut-in): \_\_\_\_\_

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.  
**Buddy J. Knight** (Signature)  
District Production Manager  
10-25-78 (Date)  
OIL CONSERVATION COMMISSION  
RECEIVED **NOV 1 1978**  
Orig. Signed by **Jerry Sexton**  
Dist. L. Supv.  
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 of 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, name or number, or transporter, or other such change of condition.

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-1  
Effective 1-1-65

DISTRIBUTION		
SA TA FE		
FI E		
G.S.		
ID OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

I. Operator

Cleary Petroleum Corporation

Address

Suite 200 Gihls Towers West, Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well ☐

Change in Transporter of:

Other (Please explain)

Recompletion ☐

Oil ☐

Dry Gas ☐

Change in Ownership ☒

Casinghead Gas ☐

Condensate ☐

Effective 8/1/74

If change of ownership give name and address of previous owner

Wolfson Oil Company, 3206 Republic Bank Tower, Dallas, Texas

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Matkins	2	Yates (7 Rivers)	State, Federal or Fee Fee	PC 466
Location				
Unit Letter	0	715 Feet From The south Line and	1923 Feet From The east	
Line of Section	15	Township 23S	Range 36E	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"/>	Address (Give address to which approved copy of this form is to be sent)					
Texas-New Mexico Pipe Line Co.	P. O. Box 1510, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips Petroleum Company	Fourth & Washington, Odessa, Texas 79762					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	0	15	23S	36E	Yes	Unknown

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	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	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 (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.

Mary Ann Ferguson  
(Signature)

Production Clerk

(Title)

8/19/74

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY \_\_\_\_\_

Orig. Signed By  
Joe D. Ramey

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.