

DISTRIBUTION	
ANTA FE	
ILE	
I.S.G.S.	
AND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION 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-110  
Effective 1-1-65

I.

Operator	
Address	
Reason(s) for filing (Check proper box)	
New Well	<input type="checkbox"/>
Recompletion	<input checked="" type="checkbox"/>
Change In Ownership	<input type="checkbox"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Kind of Lease	Lease No.
A.M. Blinbry Fed. NCT-1 23 Tubb Gas	State, Federal or Fee	1C-032104 (a)
Location		
Unit Letter C 660	Feet from The North 1980	Feet from The West
Line of Section 29	Township 22S	Range 38 E
NMPM, Lea		County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	Address (Give address to which approved copy of this form is to be sent)
Texas-New Mexico Pipe Line Company	P. O. Box 1510, Midland, Texas 79701
Northern Natural Gas Co.	P. O. Box 2388 Hobbs, New Mexico 88240
If well produces oil or liquids, give location of tanks.	When
E 33 22S 38E	February 20, 1975

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

PC-29

IV. COMPLETION DATA

Designate Type of Completion - (S)	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
February 15, 1965	November 4, 1974	7100'					
Elevations (DF, RKB, RT, GR, etc.)	3381'	6152'					
Perforations	Tubb	6152'					
Perforate 2 7/8" casing w/2 JSPI @ 6152', 58', 66', 72', 77', 83', 90', 99', 6206', 21', 24', 53', 56', 60' & 66'							
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
11"	8 5/8"	1303'	600 sx				
7 7/8"	2 7/8"	7099'	800 sx				
7 7/8"	2 7/8"	7097'	800 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 - STB/D	Water - bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Brill. 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.

  
(Signature)  
Assistant District Superintendent  
(Title)  
February 21, 1975  
(Date)

OIL CONSERVATION COMMISSION

APPROVED

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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 recompletion 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.