

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy 1278'	T. Canyon	T. Ojo Alamo	T. Penn. "B"
T. Salt 1372'	T. Strawn	T. Kirtland-Fruitland	T. Penn. "C"
B. Salt 2490'	T. Atoka	T. Pictured Cliffs	T. Penn. "D"
T. Yates 2576'	T. Miss	T. Cliff House	T. Leadville
T. 7 Rivers	T. Devonian	T. Menefee	T. Madison
T. Queen	T. Silurian	T. Point Lookout	T. Elbert
T. Grayburg	T. Montoya	T. Mancos	T. McCracken
T. San Andres 4028'	T. Simpson	T. Gallup	T. Ignacio Qtzte
T. Glorieta	T. McKee	Base Greenhorn	T. Granite
T. Paddock 5212'	T. Ellenburger	T. Dakota	T.
T. Blinberry 5652'	T. Gr. Wash	T. Morrison	T.
T. Tubb 6128'	T. Granite	T. Todilto	T.
T. Drinkard 6446'	T. Delaware Sand	T. Entrada	T.
T. Abo	T. Bone Springs	T. Wingate	T.
T. Wolfcamp	T.	T. Chinle	T.
T. Penn.	T.	T. Permian	T.
T. Cisco (Bough C)	T.	T. Penn. "A"	T.

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	1278	1278	Red Beds				
1278	1372	94	Anhydrite				
1372	2490	1118	Salt & Anhydrite				
2490	4028	1538	Shale, Sand & Anhydrite				
4028	7350	3322	Lime with Streaks Shale & Anhydrite				

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	GAS	
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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
Mabee Royalties, Inc.
Address
201 First Savings Building, Midland, Texas 79701
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name **Belcher "A"** Well No. **1** Pool Name, Including Formation **Blinebry** Kind of Lease **Fee** Lease No.
Location
Unit Letter **N** ; **1980** Feet From The **West** Line and **660** Feet From The **South**
Line of Section **7** Township **22-S** Range **38-E** , NMPM, **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Admiral Crude Oil Corporation Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1713, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Warren Petroleum Corporation Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1589, Tulsa, Oklahoma 74102
If well produces oil or liquids, give location of tanks. Unit **M** Sec. **7** Twp. **22-S** Rge. **38-E** Is gas actually connected? **Yes** When **9-11-68**

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 **7-26-68** Date Compl. Ready to Prod. **9-11-68** Total Depth **7350'** P.B.T.D. **6370'**
Elevations (DF, RKB, RT, GR, etc.) **3346' GL** Name of Producing Formation **Blinebry** Top Oil/Gas Pay **5623'** Tubing Depth **5803'**
Perforations **5623', 5635', 5641', 5645', 5649', 5690', 5712', 5722', 5726', 5733', 5735', /** Depth Casing Shoe **7350'**
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12-1/4" **9-5/8" 32#** **1300'** **470**
8-3/4" **7" 20, 23, 26#** **7350'** **1073**
2-3/8" 4.7# **5803'**

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 9-11-68	Date of Test 9-25-68	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure 30	Casing Pressure 200	Choke Size None
Actual Prod. During Test 146	Oil - Bbls. 96	Water - Bbls. 50	Gas - MCF 1620

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.

Curtis C. McFarland
(Signature)
Engineer
(Title)
September 26, 1968
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY John W. Runyan
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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.