

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

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

I. Operator  
Texas Pacific Oil Company, Inc.  
Address  
P. O. Box 4067, 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 Elliott B-12	Well No. 2	Pool Name, Including Formation Drinkard	Kind of Lease State, Federal or Free Federal	Lease No.
Location Unit Letter <u>D</u> ; <u>567</u> Feet From The <u>North</u> Line and <u>467</u> Feet From The <u>West</u> Line of Section <u>12</u> Township <u>22-S</u> Range <u>37-E</u> , NMPM, <u>Lea</u> 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"/> <del>Texas New Mexico Pipe-Line</del> Permian Corp. <del>P. O. Box 1510, Midland, Texas 79701</del>	Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1137, Eunice, New Mexico 88231				
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 12	Twp. 22-S	Re. 37-E	Is gas actually connected? <input type="checkbox"/> When

If this production is commingled with that from any other lease or pool give commingling order number: PC 523

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
		X						
Date Spudded 9-26-75	Date Compl. Ready to Prod. 12-12-75	Total Depth 7425	P.B.T.D.					
Elevations (DF, RKB, RT, CR, etc.) CR 3350	Name of Producing Formation Drinkard	Net Lb./Gas Pay 6235	7400					
Perforations 6221-7001			Tubing Depth 6094'					
			Depth Casing Shoe 7425'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	9 5/8"	1150'	550 Sxs.					
8 3/4"	7"	7425'	1250 Sxs.					
	2 3/8"	6094'						

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.	Gas-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1728	Length of Test 24 Hrs.	Soln. Condensate/MMCF 7	Gravity of Condensate 58.9
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 1700	Casing Pressure (Shut-in) Packer	Choke Size 26/64

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.

Area Superintendent

January 23, 1976

OIL CONSERVATION COMMISSION

APPROVED

AUG 30 1976

BY

TITLE

SUPERVISOR DISTRICT I

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.