

SANTA FE	
FILE	
U.S.G.S.	
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-110  
Effective 1-1-65

Operator The Wiser Oil Company	
Address P.O. Box 2467 Hobbs, New Mexico 38240	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	
If change of ownership give name and address of previous owner _____	

Other (Please explain)  
**CASINGHEAD GAS MUST NOT BE  
FLARED AFTER 10/24/76  
UNLESS AN EXCEPTION TO R-407  
IS OBTAINED.**

II. DESCRIPTION OF WELL AND LEASE			
Lease Name Downes "B"	Well No., Pool Name, Including Formation 4 Drinkard	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter A ; 525 Feet From The North Line and 330 Feet From The East Line of Section 6 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"/>	Address (Give address to which approved copy of this form is to be sent) Shell Pipe Line Company P.O. Box 1910 Midland, Tex. 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) Warren Petroleum Company P.O. Box 1589 Tulsa, Okla. 47121		
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 6	Twp. Pge. 22S 37E
Is gas actually connected?		When	

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 6-25-76	Date Compl. Ready to Prod. 8-7-76	Total Depth 6732'	P.B.T.D. 6726'
Elevations (DF, RKB, RT, GR, etc.) 3402.0	Name of Producing Formation Drinkard	Top Oil/Gas Pay 6529	Tubing Depth 6384
Perforations 6571' through 6678', 64 holes			Depth Casing Shoe 6732'
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4'	8-5/8" - 24#	1122'	550 SX
7-7/8"	5-1/2" - 15.5, 17#	6732	750 SX
	2-3/8" - 4.70#	6384	

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 8-21-76	Date of Test 8-23-76	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 600	Casing Pressure 900	Choke Size 1/2"
Actual Prod. During Test 206 bbls.	Oil-Bbls. 121	Water-Bbls. 85	Gas-MCF 445

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		OIL CONSERVATION COMMISSION	
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.		APPROVED _____, 19____	
B.D. Singletary District Supt. (Title) 8-26-76 (Date)		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 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.	

8-10-76

RECEIVED

AUG 26 1976

UPL CONSERVATION COMM.  
HOBBS, N. M.