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U.S.G.S.	
LAND 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

Operator
MARTINDALE PETROLEUM CORPORATION

Address
Box 1955, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)
THIS WELL GAS MUST NOT BE USED FOR PRODUCTION TO 14070 IS CERTAIN.

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name PanCana Federal	Well No. 1	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Fee Federal	Lease No. NM-1410
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Location

Unit Letter **M** ; **660** Feet From The **South** Line and **990** Feet From The **West**

Line of Section **6** Township **223** 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"/> Navajo Crude Oil Marketing	Address (Give address to which approved copy of this form is to be sent) Box 175, Artesia, NM 88210
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) Box 1650, Tulsa, OK 74102

If well produces oil or liquids, give location of tanks.	Unit M	Sec. 6	Twp. 223	Rge. 37E	Is gas actually connected? no	When 1/15/79
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If this production is commingled with that from any other lease or pool, give commingling order number: **EFFECTIVE JANUARY 31, 1977, SKELLY OIL COMPANY MERGED INTO GETTY OIL COMPANY.**

V. COMPLETION DATA

Designate Type of Completion - (X)	<input checked="" type="checkbox"/> Oil Well	<input type="checkbox"/> Gas Well	<input checked="" type="checkbox"/> New Well	<input type="checkbox"/> Workover	<input type="checkbox"/> Deepen
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Date Spudded 11/20/76	Date Compl. Ready to Prod. 12/22/76	Total Depth 6800'	P.B.T.D. 6766'
Elevations (DF, RKB, RT, GR, etc.) 3457 GL	Name of Producing Formation Drinkard	Top Oil/Gas Pay	Tubing Depth 6662'
Perforations 4 0.46 JHPP 6462-6464 6510-6512	6544-6546 6603-6605	6633-6635 6652-6654	Depth Casing Shoe 6800'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT Circ.
11 1/4"	8 5/8" new K-55 24'	1092'	3450 ex Class C 43 gal 2% CaCl
			200 ex Class C 2% CaCl Circ.
7 7/8"	5 1/2" used K-55 60-17'	6800'	3550 ex 43 gal 300 ex 2% CaCl Cir
	2 3/8" J-55 4.7' 8rd RUE	6662'	1600 63 gal 10#/ex salt 100ex 2% CaCl Circulated

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 12/22/76	Date of Test 12/23/76	Producing Method (Flow, pump, gas lift, etc.) swab
Length of Test 24	Tubing Pressure	Casing Pressure
Actual Prod. During Test 385	Oil - Bbls. 35 97	Water - Bbls. 238
		Gas - MCF 108 Bbl load water 150 400

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

Jo Johnson
(Signature)
Secretary-Treasurer
(Title)
January 6, 1977
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY **James L. Lott**

TITLE **SUPERVISOR DISTRICT II**

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 change of owner, well name or number, or transporter or other such change of condition.

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JAN 6 1977
OIL CONSERVATION COMM.
HOBBS, N. M.