

DISTRIBUTION			
SANTA FE			
FILE			
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

Operator Black River Corporation	
Address 2100 First National Bank Building Midland, Texas 79701	
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"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

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

Lease Name El Paso State		Well No. 1	Pool Name, including Formation Jalmar <i>SR</i>	Kind of Lease State, Federal or Fee State	Lease No. B-1167-16
Location					
Unit Letter J	1880	Feet From The	South	Line and	1650
Line of Section 22		Township 23 S	Range 36 E	NMPM,	Lea County

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company		P.O. Box 1492 El Paso, Texas 79978	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
			Rge.
			Is gas actually connected? No
			When

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

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X						
Date Spudded 6-9-69	Date Compl. Ready to Prod. 7-27-79	Total Depth 3610		P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3392.5	Name of Producing Formation Jalmar <i>SR</i>	Top Oil/Gas Pay 3045		Tubing Depth 3528					
Perforations 3450, 3480, 3510, 3531, 3538		Depth Casing Shoe 3610							
1 shot at 3045, 3051, 3060, 3077, 3084, 3088, 3093, 3115, 3122, 3225, 3241, 3298, 3430									
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8 5/8" 24#		383		200 SX Class C				
7 7/8"	5 1/2" 15.5#		3610		400 SX Howco Econolite				
					350 SX 50-50 Pozmix				

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.	Water-Bbls.	Gas-MCF

GAS WELL			
Actual Prod. Test-MCF/D 25 MCF	Length of Test 6 hrs.	Bbls. Condensate/MMCF None	Gravity of Condensate None
Testing Method (pitot, back pr.) pitot	Tubing Pressure (Shut-in) 110	Casing Pressure (Shut-in) 100	Choke Size 3/4"

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 <i>Aug 10 1979</i>	
<i>Ronnie Anderson</i> (Signature)		BY <i>John W. Nungesser</i>	
<i>Vice President</i> (Title)		TITLE <i>Geologist</i>	
<i>7-27-79</i> (Date)		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.	