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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 Reserve Oil and Gas Company	
Address First Savings Building, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transportation ☐
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

Other, please explain:
To designate a new well number. Was formerly Cooper Jal Unit No. 307 in Jalmat (Yates Gas) Pool.

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Cooper Jal Unit	Well No. and Name of Producing Formation 234 Jalmat Yates Seven Rivers	Kind of Lease State, Federal, or Fee Fee	Lease No.
Location			
Unit Letter O	330	East of the S	Line and 1650
Line of Section 13		Township 24-S	Range 36-E
		County Lea	State

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address where copies to which approved copy of this form is to be sent
None - this is a water injection well	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address where copies to which approved copy of this form is to be sent
None - this is a water injection well	
If well produces oil or liquids, give location of tanks.	

If this production is commingled with that from any other lease or pool, give acreage and well number

IV. COMPLETION DATA

Designate Type of Completion - (X)		Well	Tested	Shut-in	Deepen	Log Back	Same Res't	Diff. Res't
Date Spudded		Date Comp. Ready to Prod.		Total Depth		FEET/D.		
Elevations (DF, RKB, RT, SR, etc.)		Name of Drilling Contractor		To		Tubing Depth		
Perforations				Depth Casing Shoe				
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE		CASING & TUBING SIZE		SOLIDS SET		SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Test must be after recovery of initial volume of load oil and must be equal to or exceed top allowable for this depth or be formulated lower

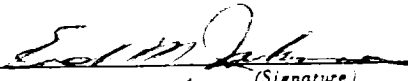
Date First New Oil Run To Tanks	Date of Test	Producing method (flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate - MCF	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.


(Signature)
District Manager
(Title)
OCT 25 1971
(Date)

OIL CONSERVATION COMMISSION

APPROVED **10 2 1971**, 19
BY **Joe D. Ramsey**
TITLE **Dist. M. Supv.**

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