

El Paso NATURAL GAS
COMPANY

P. O. BOX 1384
JAL, NEW MEXICO 88252
PHONE: 505-395-2551

May 1, 1978

Oil Conservation Commission
State of New Mexico
P. O. Box 1980
Hobbs, NM 88240

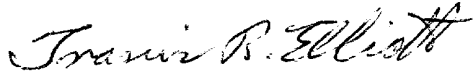
Gentlemen:

This is to advise that on May 1, 1978 the Texas Pacific Oil Company's S.R. Cooper #5 gas well located in Unit H of Section 14, Township 24-S, Range 36-E, Lea County, New Mexico was disconnected from El Paso Natural Gas Co.'s gathering system.

This disconnection was due to well being temporarily abandoned.

Yours truly,

PERMIAN DIVISION DISPATCHING DEPARTMENT



Travis R. Elliott
Gas Production Status Analyst

TRE:b1

c c: Mr. James Kapteina, O.C.C., Santa Fe, NM
Proration Dept.
H. O. Whitt
Gas Purchases
Sam Smith
H. P. Logan
T. J. Crutchfield
Operator
Measurement /
R. H. Barnett
Earl Smith
R. T. Speer
Vernon Rogers
File

DISTRIBUTION	
ANTA FE	
ILE	
I.S.G.S.	
AND 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-1
Effective 1-1-65

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)
To Correct Kind of Lease
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Cooper	Well No. 5	Pool Name, Including Formation Jalmat Gas	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter H ; 1980 Feet From The north Line and 660 Feet From The east Line of Section 14 Township 24-S Range 36-E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
The Permian Corporation	P. O. Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	Jal, New Mexico 88252
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
H 14 24-S 36-E	

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	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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	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

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.

W. J. McIntosh
(Signature)
District Operations Superintendent
(Title)
March 31, 1977
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 4 1977, 19
Signed by
BY Harry Saxton
Dist. In Charge
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.

RECEIVED
JUL 4 1977
U.S. DEPARTMENT OF JUSTICE