

Oil Conservation Commission
Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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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

ILLEGIBLE

Operator: Austral Oil Company Incorporated
Box 259 - Lamesa, Texas 79331
Change in Transporter of:
Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Previous owner give name and address of previous owner: W. K. Byrom - Box 147 - Hobbs, New Mexico

Well Name: Davis "A" Well No.: 2 Pool Name, including Formation: Langlie Mattix Kind of Lease: State, Federal or Fee Fee: Fee Lease No.:
Location: K 1980 Feet From The South Line and 2160 Feet From The West Line
Section: 33 Township: 23S Range: 37E NMPM, Lea County

Transporter of Oil and Natural Gas
Name of Authorized Transporter of Oil XXX or Condensate ☐ Address (Give address to which approved copy of this form is to be sent): Box 1510 - Midland, Texas
Name of Authorized Transporter of Casinghead Gas XX or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent): Box 1492 - El Paso, Texas
Unit: L Sec.: 33 Twp.: 23 Rge.: 37 Is gas actually connected? yes When: 5-23-56

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 Restv. ☐ Diff. Restv. ☐
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:

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: Date of Test: Producing Method (Flow, pump, gas lift, etc.):
Length of Test: Tubing Pressure: Casing Pressure: Choke Size:
Water Prod. During Test: Oil-Bbls.: Water-Bbls.: Gas-MMCF:

Gravity of Condensate
Water Prod. Test-MMCF/D: Length of Test: Bbls. Condensate/MMCF: Gravity of Condensate:
Tubing Method (flow, back pr.): Tubing Pressure (Shut-in): Casing Pressure (Shut-in): Choke Size:

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.
Travis King (Signature)
District Superintendent
October 9, 1973 (Date)

OIL CONSERVATION COMMISSION
APPROVED: 1973, 10
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.