

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

1. OPERATOR
TRANSPORTER
CAND OFFICE
OPERATOR
PRODUCTION OFFICE

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1. OPERATOR
TRANSPORTER
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OPERATOR
PRODUCTION OFFICE

2. NAME OF OPERATOR
P.O. Box 1031, Midland, Texas

3. REASON FOR FILING (Check proper box)
Change in Transporter of:
Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐
Change in Ownership ☒ Other (Please explain)
Change name of lease from
Federal Ginsberg NM 0569
Effective 10-1-65

If change of ownership give name and address of previous owner
Leonard Oil Company, 10th Floor Security Life Bldg., Roswell, New Mexico

II. DESCRIPTION OF WELL AND LEASE

1. Well Name
Ginsberg Federal

2. Well No.
10

3. Pool Name, Including Formation
Justis Blinbry

4. Kind of Lease
State, Federal or Fee Federal

5. Location
Unit Letter L, 1980 Feet From The South Line and 330 Feet From The West

6. Line of Section 31, Township 25S, Range 38E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

1. Name of Authorized Transporter of Oil ☒ or Condensate ☐
Texas New Mexico Pipeline Company
Box 1510, Midland, Texas

2. Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
El Paso Natural
Box 1492, El Paso, Texas

3. If well produces oil or liquids, give location of tanks.
Unit Sec. Twp. Rge. Is gas actually connected? When
D 31 25S 38E yes unknown

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

IV. COMPLETION DATA

1. Designate Type of Completion - (X)
Oil Well ☒ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Restv. ☐ Diff. Restv. ☐

2. Date Spudded
Date Compl. Ready to Prod.
Total Depth
P.B.T.D.

3. Pool
Name of Producing Formation
Top Oil/Gas Pay
Tubing Depth

4. Informations
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

1. Date First New Oil Run To Tanks
Date of Test
Producing Method (Flow, pump, gas lift, etc.)

2. Length of Test
Tubing Pressure
Casing Pressure
Coke Size

3. Actual Prod. During Test
Oil - Bbls.
Water - Bbls.
Gas - MCF

GAS WELL

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

2. Testing Method (pitot, back pr.)
Tubing Pressure
Casing Pressure
Coke 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.

OIL CONSERVATION COMMISSION

APPROVED
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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter or other such change of condition.

Complete Forms C-104 must be filed for each pool in multiple

District Office Supervisor

October 1, 1965

(Date)

R. L. Leggett

(Signature)

(Title)