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TRANSPORTER	OIL	
	GAS	
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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-105
Effective 1-1-65

Operator Cornell Oil Company, Agent for Samedan Oil Corp. and A. A. Kemnitz	
Address 4616 Greenville Avenue, Dallas, Texas 75206	
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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hughes- Federal "B"	Well No. 2	Pool Name, Including Formation Jalmat Gas Pool (Yates & Seven Rivers)	Lease State, Federal or Fee Federal	Lease No. LC-032
Location Unit Letter "O" ; 660 Feet From The South Line and 1980 Feet From The East				
Line of Section 17 Township 23-S Range 37-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 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	20th Floor, Wilco Bldg., Midland, Texas					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					No	Contract pending

If this production is commingled with that from any other lease or pool, give commingling order number: None

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded November 29, 1966	Date Compl. Ready to Prod. March 10, 1967	Total Depth 3698'	P.B.T.D. 3167'					
Elevations (DF, RKB, RT, GR, etc.) 3327.8 RKB	Name of Producing Formation Yates & Seven Rivers	Top Oil/Gas Pay 2609'	Tubing Depth 2922'					
Perforations One 3/8" perforation @ following points: 2609', 2622', 2635', 2664', 2684', 2703', 2733', 2788', 2816', 2876', 2959', & 3028'. (Total of 12 perfs.)		Depth Casing Shoe 3698'						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	9 5/8"		368'		225 sx - circulated			
8 3/4"	7"		3698'		300 sx 50-50 Posmix			

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 104	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
24 hr. calc. -613 MCF	4 hours	0	-
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	1079	1069	5/16"

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.

L. C. Spencer
(Signature)
Vice President, Production
(Title)
3/22/67
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
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.