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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

ILLEGIBLE

Operator Bronco Oil Corporation	
Address P. O. Box 5114, Midland, Texas	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	This well is proposed as a dual oil-oil producer from the Blinebry & Tubb-Drinkard formations
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	
Dry Gas <input type="checkbox"/>	
Casinghead Gas <input type="checkbox"/>	
Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Fanning "B"	Well No. 1	Pool Name, Including Formation Undesignated Teague-Blinebry R-3402	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter A ; 330 Feet From The North Line and 330 Feet From The East Line of Section 33 Township 23 South Range 37 East , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Unknown	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 33
	Twp. 23-S	Rge. 37-E
	Is gas actually connected? No	
	When As soon as connection avail-	

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 11-7-67	Date Compl. Ready to Prod. 12-21-67		Total Depth 6350'		P.B.T.D. 6308'			
Elevations (DF, RKB, RT, GR, etc.) 3300' GL	Name of Producing Formation Blinebry		Top Oil/Gas Pay 5883'		Tubing Depth 5800'			
Perforations 5405-5883 as J.W.B.				Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	9-5/8"		1052'		370			
8-3/4"	7"		6349'		400			
	2-3/8"		5800'					

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)

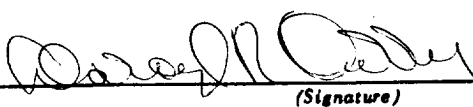
Date First New Oil Run To Tanks 12-22-67	Date of Test 1-8-68	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs.	Tubing Pressure 800#	Casing Pressure 1640#	Choke Size 16/64"
Actual Prod. During Test 142 bbls.	Oil - Bbls. 142	Water - Bbls. 0	Gas - MCF 660

GAS WELL

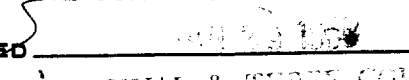
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.


(Signature)
Vice-President
(Title)
January 15, 1968
(Date)

OIL CONSERVATION COMMISSION

APPROVED  , 19
BY ORIGINAL & THREE COPIES
RECORDED BY REG. CLERK
TITLE REGISTERED INTEREST No. 1

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 transport or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.