

DISTRIBUTION	
SANTA FE	
FILL	
U.S.G.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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

Operator Argee Oil Company	
Address 213 Mid America Bldg., Midland, Texas 79701	
Reason(s) for filing (check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of: ☐
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☒	Casinghead Gas ☐ Condensate ☐
December 1, 1973	

If change of ownership give name and address of previous owner: Imperial-American Management Company, 507 Midland Savings Bldg., Midland Texas 79701

DESCRIPTION OF WELL AND LEASE				
Lease Name E. C. Hill "B"	Well No. 3	Pool Name, including Formation Teague Blinebry	Kind of Lease State, Federal or Fee	Fee
Location				
Unit Letter K	2310	Feet From The South	Line and 1650	Feet From The West
Line of Section 27	Township 23-S	Range 37-E	NMPM,	Lea
County				

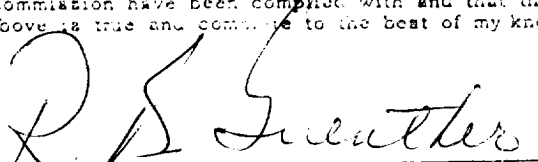
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil ☒ or Condensate ☐			Address (Give address to which approved copy of this form is to be sent)			
Shell Pipeline Company			P. O. Box 1910, Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐			Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company			P. O. Box 1492, El Paso, Texas			
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 27	Twp. 23-S	Rge. 37-E	Is gas actually connected? Yes	When

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

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 (SF, R.R.B, 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 OIL (Test must be after recovery of total volume of lost oil and must be equal to or exceed top streamable for this depth or be for full 24 hours)				
Date	Time	Flow 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	
Shut-in Pressure	Length of Test	Bbls. Condensate/MMCF	Shut-in Condensate	
Test-in Pressure (shut-in)	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 correct to the best of my knowledge and belief.	
	
Operator	(Signature)
December 28, 1973	(Date)

OIL CONSERVATION COMMISSION	
APPROVED	10
BY	Stated by
TITLE	
This form is to be filed in compliance with Section 100.	
If this is a request for allowable on a newly drilled or deepened well, this form must be accompanied by a calculation of the deviation tests taken on the well in accordance with Rule 100.	
All sections of this form must be filled out completely for allowable on new and recompletion wells.	
Fill out only Sections I, II, III, IV, V for change 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.	