NO. OF COPIES ACCEIVED		-	
DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSION	Form C-104
SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-
FILE		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL GAS	
LAN OFFICE			
OIL		· .	
GAS GAS	-		
0.4110.470.3	-		
PROPATION OFFICE			
C Decision		· · · · · · · · · · · · · · · · · · ·	<u> </u>
Address TENACO Inc.			
	Heyber Merry	Mexico 88240	
<u>P. 0 Box 728</u>	Hobs, New 1	Other (Please explain)	···
Reason(s) for thing (Check proper		Omer (ricease explaint)	
New Well	Character of:		
Recompletion	X Dry Go		
Change in Ownership	Casinghead Gas Conde	nsate	
L			
If change of ewnership , we name and address of previous owner		<u></u>	
DESCRIPTION OF WELL ANI	LEASE		
Lease Name	Well No. Pool Name, Including F	formation Kind of Lease	Leaue No
Cotton Draw Unit	70 Paduca North	Delaware Sand State, Federal or	Fee
Location Draw Unit			111
20041011 2			17
Unit Letter i;	1980 Feet From The South Li	ne and <u>660</u> Feet From The	West
Line of Section 31, T	ownship T-24-S Range	R-32-E , NMPM, Lea	Count
an and an			
UNSIGN THAN ON TRANSPOR	RTER OF OIL AND NATURAL GA	AS	
Name of Authorized Transporter of C	11 X or Condensate	Address (Give address to which approved	copy of this form is to be sent)
The Permian Corporation	Casinghead Gas or Dry Gas	1509 Vest Wall Avenue Mi Address (Give address to which approved	dland Toxas 79701
Name of Authorized Transporter of C		Address (White dataless to which approved	
NONE (To be connected	and the second		
If well produces oil or liquids,	Unit Sec. Twp. Age.	Is gas actually connected? When	
give location of tanks.	L 34 T-24-S R-32	E No	
	with that from any other lease or pool,	give commingling order number: NC	DNE
COMPLETION DATA	with that from any other rease of poor,		
CONFLICTION DATA	Oil Well Gas Well	New Well Workover Deepen P	lug Back   Same Res'v. Diff. Re
<ul> <li>Designate Type of Complete</li> </ul>	tion - (X) Oil No	New New New	New New Ne
	Date Compl. Ready to Prod.		B.T.D.
Date Spudded		4850'	4816
Feb. 23, 1968	March 8, 1968		ubing Depth
Elevations (DF, RKB, RT, GR, etc.,			4676
3506 (DF)	Delaware Sand	4764	epth Casing Shoe
Periorations			•
Perforate 4 1/2"OD d	asing with one jet shot p	per ft. 4764' to 4774'.	4850
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLES.ZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
9 7/8 <sup>11</sup>	7 5/8"OD	475	300 SX
6 3/49	4 1/2"OD	4850	150 SX
0 0/4			
test sata and lequest	FOR ALLOWABLE (Test must be	after recovery of total volume of load oil and lepth or be for full 24 hours)	must be equal to or exceed top al
مرد مرد المرد مي المرد الم مرد المرد	able for this a	Producing Method (Flow, pump, gas lift, e	etc. )
Oute First New Oil Run To Tanks	Date of Test		/
Manch 6, 1960	March 8, 1968	Flowing	No. Class
Longin of Tout	Tubing Pressure	Casing Pressure	Choke Size
12 Hours	900#	نعد نعد جو، جو، جو، جو،	18/64
Actual Prod. During Test	Oil-Bbls.	Water-Bbls. G	Gas - MCF
	63	12	173
75			
	L anoth of Tant	Bbls. Condensate/MMCF	Gravity of Condensate
- Actual Prod. Test-MCF/D	Length of Test		-
: 		Cooler Descours Parked on 1	Choke Size
Testing Method (pitot, sack pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	
CERTIFICATE OF COMPLIA	NCE	OIL CONSERVAT	ON COMMISSION
and the second	d engulations of the Oil Connervation	APPROVED	, 19
Committee - we here complied	d regulations of the Oil Conservation with and that the information given	N L D X YX	Terrin
above is true and complete to	the best of my knowledge and belief.	BY	thing
-			
	-7 p. 1	TITLE	
121		• This form is to be filed in con	apliance with RULE 1104.
and the first of t	e cont	To this is a securet for ellowet	to for a newly drilled or deeps
15.	ignatise)	i wall this form must be accompanie	d by a tabulation of the devia
		tests taken on the well in accorda	nce with RULE 111.
	Superintendent	All sections of this form must	be filled out completely for all
·	(Title)	able on new and recompleted wells	to a string of the state of all
March 11, 1968		Fill out only Sections I, II, I well name or number, or transporter,	ii, and vi for changes of ow or other such change of condit
	(Date)	Separate Forms C-104 must b	e filed for each nool in mult.
		Separate Forms C-104 must b completed wells.	e mee for each poor in mare
		ii compreted nerror	