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U.S.G.S.		
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

I. Operator
Solar Oil Company
Address
P. O. Box 5114, Midland, Texas
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
PURSUANT TO THE NEW RULES AND REGULATIONS TO PRODUCE
AND STORE OIL FROM THE STATE OF NEW MEXICO, THE FOLLOWING
EXCEPTION TO THE ABOVE RULES IS HEREBY AUTHORIZED BY
If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name Hughes "A" Well No. 1 Pool Name, including Formation Langlie Mattix Kind of Lease State, Federal or Fee Federal Lease No.
Location
Unit Letter G 1980 Feet From The North Line and 1980 Feet From The East
Line of Section 18 Township 23-S Range 37-E, NMPM, Lea County

III. 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)
Permian Corporation P. O. Box 3119, Midland, Texas
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ 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 Sec. Twp. Rge. Is gas actually connected? When

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 Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded 7-15-68 Date Compl. Ready to Prod. 8-23-68 Total Depth 3800' P.B.T.D. 3759'
Elevations (DF, RKB, RT, GR, etc.) 3336 GR Name of Producing Formation Queen Top Oil/Gas Pay 3635 Tubing Depth 3756
Perforations 3735'-3639' Depth Casing Shoe 3800'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12-1/4" 8-5/8" 800' 375
7-7/8" 5-1/2" 3800' 250

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL
Date First New Oil Run To Tanks 8-8-68 Date of Test 8-29-68 Producing Method (Flow, pump, gas lift, etc.) Pump
Length of Test 24 hrs Tubing Pressure Casing Pressure Choke Size
Actual Prod. During Test 90 Oil-Bbls. 77 Water-Bbls. 13 Gas-MCF 65

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.
M J Smith
(Signature)
Production Clerk
(Title)
11 September 68
(Date)
OIL CONSERVATION COMMISSION
APPROVED SE 11 1968, 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.