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U.S.G.S.		
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

I. Operator
Gifford, Mitchell & Wisenbaker

Address
1280 Midland National Bank Tower Midland, Texas 79701

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

THIS WELL HAS BEEN PLACED IN THE POOL
OF THE BASIN, INC. IF YOU DO NOT INQUIRE
WITHIN THIS OFFICE.

IF change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Quanah Parker	Well No. 1	Pool Name, including Formation Undesignated - Yates	Kind of Lease State, Federal or Fee State	Lease No. L 3002
Location Unit Letter 0 : 2310 Feet From The East Line and 330 Feet From The South Line of Section 28 Township 26-S Range 36-E, NMCM, 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"/> Basin, Inc.	Address (Give address to which approved copy of this form is to be sent) 511 W. Ohio Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 0	Sec. 28	Twp. 26S	Pge. 36E	Is gas actually connected? no	When as soon as possible

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
Date Spudded 1/10/78	Date Compl. Ready to Prod. 1/23/ 78		Total Depth 3310'		P.B.T.D. none			
Elevations (DF, RAB, RT, GR, etc., GR= 2901'	Name of Producing Formation Yates		Top Oil/Gas Pay 3114'		Testing Depth 3022'			
Perforations 3123' to 3162' 12, 0.38" holes					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		1395'		950			
7 7/8"	5 1/2"		3310'		350			
7 7/8"	2 3/8"		3022'					

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 2/3/78	Date of Test 2/10/78	Producing Method (Flow, pump, gas lift, etc.) flowing	
Length of Test 24 hrs.	Tubing Pressure 925 psi	Casing Pressure	Choke Size 14/64"
Actual Prod. During Test 132 bbls.	Oil-Bbls. 132	Water-Bbls. 39	Gas-MCF 735

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

Deanna Neelke
(Signature)
Production Clerk
(Title)
2/15/78
(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 name, well number, or number, or transporter, or other such change of condition.
Separate Form C-104 must be filed for each pool in multiple completion well.