

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-111  
Effective 1-1-65

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

Operator Kern Co.	
Address 250 Mid America Building, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain) <b>CASINGHEAD GAS MUST NOT BE FLARED AFTER 11/1/82 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.</b>	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Eunice Cooper	Well No. 2	Pool Name, Including Formation Langlie Mattix	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter J	1980	Feet From The South	Line and 1980	Feet From The East
Line of Section 11	Township 24-S	Range 36-E	NMPM, Lea Co.	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) Box 1183 Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492 El Paso, Texas 79978					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 11	Twp. 24-S	Rge. 36-E	Is gas actually connected? No	When 60 days

If this production is commingled with that from any other lease or pool, give commingling order number: No

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9/17/82	Date Compl. Ready to Prod. 10/26/82	Total Depth 3800'	P.B.T.D. 3734					
Elevations (DF, RKB, RT, GR, etc.) GL 3356	Name of Producing Formation Langlie Mattix	Top Oil/Gas Pay 3545	Tubing Depth 3615					
Perforations 3624 to 3720' with 15 shots			Depth Casing Shoe 3799					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	538	375 sx circulated					
7 7/8"	4 1/2"	3799	850 sx Circulated					
4"	2 3/8"	3615	none					

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)

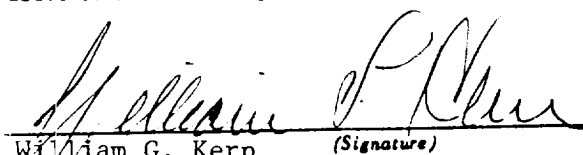
Date First New Oil Run To Tanks 10/29/82	Date of Test 10/29/82	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 178 psig	Casing Pressure None Packer	Choke Size 27/64
Actual Prod. During Test	Oil-Bbls. 11	Water-Bbls. 2	Gas-MCF 875

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

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.

  
William G. Kern (Signature)  
Engineer (Title)  
11-1-82 (Date)

OIL CONSERVATION COMMISSION

NOV 5 1982

APPROVED \_\_\_\_\_, 19\_\_\_\_

ORIGINAL SIGNED BY

BY JERRY SEXTON

TITLE DEPUTY SUPERVISOR

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.