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

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-116 Effective 1-1-65	
FILE	4.17.10D17.47.10V TO TD4	AND	A C	
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	A3 .	
LAND OFFICE	-	e de la companya de l		
TRANSPORTER GAS	+			
OPERATOR	+			
PRORATION OFFICE				
Operator				
RODMAN	PETROLEUM CORPORATION			
Address				
P.O. BO	x 3826, Odessa, Texas	Other (Please explain)		
New Well	_	Change in Transporter of: Request change in ownership and		
Recompletion	Oil Dry Ga	change in operator to Rodman		
Change in Ownership	Casinghead Gas Conden	sate Petroleum Corpo	pration	
If change of ownership give n and address of previous owner		Box 591, Odessa, Texas	<u> </u>	
. DESCRIPTION OF WELL	AND LEASE Well No. Pool Na	me, Including Formation	Kind of Lease	
Humble, State	n 2 Lang	Lie-Mattix(Queen Sand)	State, Federal or Fee State	
Location	<u> </u>			
Unit Letter H ;	660 Feet From The East Lin	e and 1980 Feet From T	The North	
Outr Fetter ** !			Tan	
Line of Section 32	, Township 24S Range	37E , NMPM,	Lea County	
DESIGNATION OF TRANS	SPORTER OF OIL AND NATURAL GA	Address (Give address to which approx	ved copy of this form is to be sent)	
Name of Authorized Transporte		No allowable assigne		
None - well S		Address (Give address to which approx	ped copy of this form is to be sent)	
None - well s		No allowable assigned		
	Unit Sec. Twp. Rge.	Is gas actually connected? Whe		
If well produces oil or liquids, give location of tanks.	NONE	No	_	
If this production is comming	led with that from any other lease or pool,	give commingling order number: No	ot commingled	
V. COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Cor		Mem Mett Motrover Beeber	1	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
1939	1939	3550	3550	
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Langlie-Mattix	Queen Sand	3400	3350	
Perforations	1 4400		Depth Casing Shoe	
			<u> </u>	
		D CEMENTING RECORD	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	3350	250	
8,1	7" OD	3330	250	
V. TEST DATA AND REQU	EST FOR ALLOWABLE (Test must be a	after recovery of total volume of load oil	and must be equal to or exceed top allow	
OIL WELL	ubie for titta u	epth or be for full 24 hours) Producing Method (Flow, pump, gas li		
Date First New Oil Run To To	_	Producing Method (riow, pump, gas it	, , , , , , , , , , , , , , , , , , ,	
No allowable req		Casing Pressure	Choke Size	
Length of Test	Tubing Pressure	_	_	
Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	Gas-MCF	
		_	_	
Note: This well	will be used in secondary	recovery operations i	n the proposed	
GAS WELL Langlie-	Jal Unit Queen Sand Waterf	lood.		
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
No allowable r			Chaha Sina	
Testing Method (pitot, back p	Tubing Pressure	Casing Pressure	Choke Size	
-		011 001107711	ATION COMMISSION	
VI. CERTIFICATE OF COM	PLIANCE	OIL CONSERVA	ATION COMMISSION	
	and completions of the Oil Companyation	APPROVED	, 19	
Commission have been con	es and regulations of the Oil Conservation plied with and that the information given			
above is true and complete	to the best of my knowledge and belief.	BÝ		
		TITLE		
	9 1 <i>L</i> .	This form is to be filed in	compliance with RULE 1104.	
	/ // // /	Tura total is to be titled in		

Engineer (Title)

June 7, 1965

(Date)

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 Sections I, II, III, and VI only 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.