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Asst. Dist. Supt.

9-4-68

(Title)

(Date)

EW MEXICO OIL CONSERVATION COMMISSIC. REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE	SEP 13 1 57 14 758			
TRANSPORTER GAS	1			
OPERATOR]			
PRORATION OFFICE		N.	AME CHANGE	
Operator	-law Composition		MERADA PETROLEUM COPR. DIAMERADA HESSI CORP	
Amerada Petr Address	oleum Corporation		FECTIVE July 1, 969	
P. O. Box 66	8 - Hobbs, New Mexico			
Reason(s) for filing (Check proper box		Other (Please explain)		
New Well Recompletion	Change in Transporter of: Oil Dry Gas Fffective 9-1-		L Name & Number 68 from Langlie Matti :	
Change in Ownership	Casinghead Gas Conden	sate Woolworth Uni	68. from Langlie Mattix t Tr. 12 Well #1.	
full and an archite size nome				
change of ownership give name nd address of previous owner				
DESCRIPTION OF WELL AND	LEASE TA			
Lease Name	Well No. Pool Name, Including Fo	•		
anglie Mattix Woolworth	u Unit 121 Langlie	Mattix State, Federa	Fee Fee	
Location	North	660 500 500	rho Rost	
Unit Letter H; 198	BO Feet From The North Lin	le and 000 reet from	Trabe	
Line of Section 34 To	wnship 24-S Range 3	37-E , NMPM, Lea	County	
	MED OF OUR ASID SIAMSINAS OF	(C ·		
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GA	Address (Give address to which approx	ved copy of this form is to be sent)	
		P. O. Box 1598 - Ho Address (Give address to which appro-	bbs, New Mexico	
Shell Pipe l Name of Authorized Transporter of Ca				
El Paso Nati	ral Gas Co. Unit Sec. Twp. Rge.	P. O. Box 1492 - E1 Is gas actually connected?	Paso, Texas	
If well produces oil or liquids, give location of tanks.	T 28 24-S 37-E	Yes		
·	ith that from any other lease or pool,			
COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'	
Designate Type of Completi	on - (X) Gas Well	Maw Mail Molfoder Seaber		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
·				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations		1	Depth Casing Shoe	
, 0.1014110114				
	TUBING, CASING, AN	D CEMENTING RECORD	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	·			
			<u> </u>	
TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be able for this d	after recovery of total volume of load oil epth or be for full 24 hours)	and must be equal to or exceed top allo	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas !	ift, etc.)	
			Choke Size	
Length of Test	Tubing Pressure	Cosing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF	
Actual Prod. Sulmy 1991				
GAS WELL	1	Bbls. Condensate/MMCF	Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Data Conference of Minor		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
			4.TION CONTUCCION	
CERTIFICATE OF COMPLIANCE		OIL CONSERV	ATION COMMISSION	
	to contrata and also Ott Campanination	APPROVED	19	
a transfer boom complied	i regulations of the Oil Conservation with and that the information given	4.0	Three	
above is true and complete to the best of my knowledge and belief.		BY STORY		
/ /		TITLE		
(Signature)		This form is to be filed in	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati	
		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.

Fill out only Sections 1, 11, 111, and vi to change of condition.

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.