

DISTRIBUTION			
SANTA FE			
FILE			
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-
Effective 1-1-65

I. Operator
Burleson & Huff
Address
P. O. Box 935, 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 ☐
Other (Please explain) 4-172
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Dabbs	Well No. 2	Pool Name, Including Formation Langlie-Mattix Queen	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter D 660 Feet From The North Line and 660 Feet From The West Line of Section 35 Township 25S Range 37E NMPM, 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"/> 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 Company	Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, Texas	
If well produces oil or liquids, give location of tanks. Unit D Sec. 35 Twp. 25S Rge. 37E	Is gas actually connected? no	When 1-1-76

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	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded 8-28-75	Date Compl. Ready to Prod. 11-1-75	Total Depth 3325	P.B.T.D. 3221					
Elevations (DF, RKB, RT, GR, etc.) 3021 DF	Name of Producing Formation Queen	Top Oil/Gas Pay 3150	Tubing Depth 3311					
Perforations 3217, 3212, 3199, 3187, 3175, 3171, 3150			Depth Casing Shoe 5-1/2 - 3315					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-3/4	10"	103	75					
10-3/4	8-1/4"	1193	150					
8-3/4	7"	3038	150					
6-3/4	5-1/2"	(3020-3315)	150					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks 11-1-75	Date of Test 11-1-75	Producing Method (Flow, pump, gas lift, etc.) flowing	
Length of Test 24 hours	Tubing Pressure -	Casing Pressure 50#	Choke Size -
Actual Prod. During Test	Oil-Bbls. 12	Water-Bbls. 2	Gas-MCF 14 10

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.

(Signature)

Co-Owner

(Title)

11- 3-75

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY Jerry Dyer

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.

STANDARD

Series: Huff

P. O. Box 30, Midland Texas 79701

Request 140 bbl testing
allowable, as we need to move this amount
of crude from our test tank.

Calts

Landlie-actix

140

north

100

100

171

Lease No.

State, Federal

Fee

West

Lea

County

III. DESIGN OF WELL (SEE REVERSE SIDE AND ATTACHMENTS)

The Permian Corporation

Official Tests

IV. COMPLETION DATA

V. TEST DATA (SEE REVERSE SIDE AND ATTACHMENTS)

OIL WELL

Test

Actual

GAS WELL

Actual

Testing Method (Shut-in)

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the well complies with the regulations of the Oil Conservation Commission and that the information given above is true and complete to the best of my knowledge and belief.

Owner

October 2, 1977

CONSERVATION COMMISSION

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as filed in accordance with RULE 1104.

For allowance, the well must be drilled or deepened in accordance with the regulations of the deviation within accordance with RULE 1111.

The form must be filled out completely for allowable well.

Sections 1, 2, 3, and 4 for changes of owner, or transportation, or change of condition.