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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PROBATION 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

(Deviation Surveys on Back side)

110045 OFFICE O.C.C.
13 10 39 AM '65

I. San American Petroleum Corp
Box 68, Hobbs, NM 88240
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☒ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Fowler-Upper Yesso R-3987
Lease Name SOUTH MATTIX UNIT Well No. 19 Pool Name, including formation FOWLER BLINEBRY Kind of Lease FEDERAL
Location C 660 Feet From The NORTH Line and 1980 Feet From The WEST Line of Section 22, Township 24-S Range 37-E, NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
SHELL PIPE LINE CORP Box 1910, MIDLAND, TEXAS
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
EL PASO NATURAL GAS CO Box 1384, JAL N.M.
If well produces oil or liquids, give location of tanks. Unit 0 Sec. 15 Twp. 24 Rng. 37 Is gas actually connected? YES (EPNG No. 6382A01) When 11/11/65

If this production is commingled with that from any other lease or pool, give commingling order number: PC-272

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Base R.P.N. ☐	Diff. Reinf. ☐
Date Spudded <u>10-5-65</u>	Date Compl. Ready to Prod. <u>11-1-65</u>		Total Depth <u>5767'</u>		P.B.T.D. <u>5730'</u>			
Pool <u>FOWLER</u>	Name of Producing Formation <u>BLINEBRY</u>		Top Oil/Gas Pay <u>5444'</u>		Testing Depth <u>5430'</u>			
Perforations <u>5444-49; 5485-90; 5527-30; 5554-57; 5605-11; 5632-35; 5714-16; 5726-29</u>					Depth Casing Shoe <u>5767'</u>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>12 1/4"</u>	<u>9 5/8"</u>		<u>1053'</u>		<u>550</u>			
<u>8 3/4"</u>	<u>7"</u>		<u>5767'</u>		<u>550</u>			

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 <u>11-10-65</u>	Date of Test <u>11-11-65</u>	Producing Method (Flow, pump, gas lift, etc.) <u>FLOWING</u>	
Length of Test <u>24</u>	Tubing Pressure <u>650</u>	Casing Pressure <u>Pkr</u>	Choke Size <u>12/64"</u>
Actual Prod. During Test	Oil-Bbls. <u>12.2</u>	Water-Bbls. <u>30</u>	Gas-MCF <u>109</u> (GOR <u>893</u>)

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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.

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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

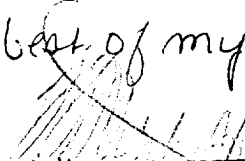
Forms C-104 must be filed for each pool in multiple

Signature Area Foreman
Title Area Foreman
Date 12-8-65

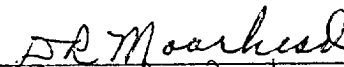
(DEVIATION SURVEYS)

DEPTH	DEGREES OFF
425	$\frac{1}{4}$
530	$\frac{1}{2}$
1030	$\frac{3}{4}$
1460	"
1850	"
2175	$1\frac{1}{4}$
2380	"
2575	"
2890	$1\frac{1}{2}$
3290	$1\frac{3}{4}$
3440	2 -
3760	$1\frac{1}{2}$
4000	2 -
4490	$2\frac{1}{4}$
4675	3 -
4900	2 -
5380	$2\frac{1}{4}$
5620	$3\frac{1}{4}$
5750	$3\frac{3}{4}$

The above are true to the best of my knowledge.


Orea Foreman

Sworn to this date, the 9th day of December, 1965.


Notary Public for Lea Co. N.M.

My Commission Expires 6-18-68