

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-110
Effective 1-1-65

I. Operator
Alpha Twenty-One Production Company
Address
2100 First National Bank Building, 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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
El Paso Ruby Federal	1	Jalmat (Yates)	State, Federal or Fee Federal	LC032511(e)
Location Unit Letter 0 ; 1880 Feet From The East Line and 660 Feet From The South Line of Section 8 Township 25S Range 37E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	P. O. Box 1492, El Paso, Texas 79978	
If well produces oil or liquids, give location of tanks.	Unit	Sec. Twp. Rge.
		is gas actually connected? When
		No

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
2-5-80	3-1-80	3300	3255					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3152 GL (3162 RKB)	Yates <i>OK 4wd</i>	2850	3020					
Perforations 2850, 2858, 2864, 2872, 2878, 2890, 2897, 2904, 2912, 2942, 2948,		Depth Casing Shoe						
3080, 3092, 3099, 3106, 3114, 3121 One shot per foot (.50" Dia)		3300						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
15"	12-3/4"	30'	Redimix to Surface					
12 1/4"	8-5/8"	406'	325-sx Class C-Circulated					
7-7/8"	5-1/2"	3300'	350 sx Cl.C 250 sx Poz -					
	2-3/8"	3020'	Circulated					

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
360	24 Hrs.	1/2 Bbl.	60
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Pitot	250	250	48/64

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.

Tommy Phipps
Tommy Phipps (Signature)
Executive Vice President
(Title)
3-3-80
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY *[Signature]*
TITLE 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.

WELL NAME & NUMBER El Paso Rub Federal #1 FEB 20 1980

LOCATION Sec. 8, T-25-S, R-37-E, Lea County, New Mexico
(Give Unit, Section, Township and Range)

OPERATOR Alpha Twenty-One Production Co., 2100 First National Bank Bldg., Midland, Texas 79701

DRILLING CONTRACTOR Kenai Drilling of Texas, Inc., P. O. Box 6725, Odessa, Texas 79762

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above-described well and that he has conducted deviation tests and obtained the following results:

<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>
<u>1/2 425</u>	<u> </u>	<u> </u>	<u> </u>
<u>3/4 922</u>	<u> </u>	<u> </u>	<u> </u>
<u>3/4 1,429</u>	<u> </u>	<u> </u>	<u> </u>
<u>1 1,930</u>	<u> </u>	<u> </u>	<u> </u>
<u>1-3/4 2,435</u>	<u> </u>	<u> </u>	<u> </u>
<u>1-3/4 2,930</u>	<u> </u>	<u> </u>	<u> </u>
<u>2 3,300</u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>

Drilling Contractor Kenai Drilling of Texas, Inc.

By *R. A. Smith*
R. A. Smith, Drilling Engineer

Subscribed and sworn to before me this 18th day of February, 19 80

Notary Public Barbara J. LaGrone

My Commission Expires 8-22-81

Ector County Texas