

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.O.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Alpha Twenty-One Production Company		
Address P.O. Box 1206, Jal, NM 88252		
Reason(s) for filing (Check proper box)		
<input checked="" type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Buckskin Federal	Well No. 5	Pool Name, including Formation Dollanhide-Tubb Drinkard	Kind of Lease State, Federal or Fee Federal	Lease No. 40658
Location				
Unit Letter M	990	Feet From The West	Line and 330	Feet From The South
Line of Section 18	Township 24-S	Range 38-E	NMPM,	Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

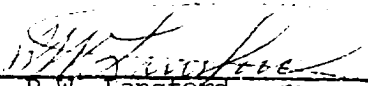
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Getty Trading and Transportation Company	P.O. Box 1142, Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P.O. Box 1494, El Paso, TX 79978
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
N 18 24S 38E	Yes 5-15-84

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


R.W. Lansford (Signature)
Vice President/Energy Resources
(Title)
May 30, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 21 1984, 19
BY Eddie W. Seay
TITLE Oil & Gas Inspector

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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX		XX					
Date Spudded 11-3-83	Date Compl. Ready to Prod. 3-25-84		Total Depth 7025			P.B.T.D. 6974			
Elevations (DF, RKB, RT, CR, etc.) 3173.55' GL	Name of Producing Formation Drinkard		Top Oil/Gas Pay 6675'			Tubing Depth 6948'			
Perforations 6675, 6679, 6681, 6684, 6696, 6706, 6719, 6721, 6723, 6726, 6740, 6742, 6744, 6749, 6859, 6860, 6861, 6862, 6863, 6875, 6876, 6877, 6886, 6888, 6890, 6898, 6900, 6904, 6906, 6910, 6912, 6914, 6916.									
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"		8-5/8"		1301'		650 sx CI.C, Circ.			
7-7/8"		5-1/2"		7019'		1st ST-650 sx 50/50 Poz			
						C, Circ, 2nd ST-1250 sx			
						Hal/Lite & 200 sx CI.C.			

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 3-25-84	Date of Test 5-10-84	Producing Method (Flow, pump, gas lift, etc.) Pumping Unit	
Length of Test 24 hours	Tubing Pressure pump	Casing Pressure 160	Choke Size 32/64
Actual Prod. During Test 27	Oil - Bbls. 10	Water - Bbls. 17	Gas - MCF 15

GAS WELL

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

RECEIVED
JUN 14 1984
C.C.D.
HOBBS OFFICE