

DISTRIBUTION			
AMT. FEE		1	
FILE		1	L
S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS		
OPERATOR		1	
PRODUCTION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION
**REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED**

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

JUL 2 1974

I. OPERATOR

Operator: B & D Oil Company **O. C. C.**
Address: P O Box 804 Hobbs, New Mexico 88240 **ARTESIA OFFICE**

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: Paul Slayton, P O Box 1936, Roswell, N. Mexico 88201

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>SRLG Unit</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Red Lake Grayburg</u>	Kind of Lease State, Federal or Fee	State <u> </u>	Lease No. <u>B 11538</u>
Location Unit Letter <u>C</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u>					
Line of Section <u>36</u> Township <u>17 S</u> Range <u>27 E</u> , NMPM, <u>Eddy</u> 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"/> <u>Navajo Refining Co. Pipeline Division</u>	Address (Give address to which approved copy of this form is to be sent) <u>N. Freeman Ave, Artesia, N. Mex. 88210</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit <u>I</u> Sec. <u>35</u> Twp. <u>17</u> Rge. <u>27</u>	Is gas actually connected? <u> </u> When <u> </u>

IV. COMPLETION DATA

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

Designate Type of Completion - (X)	<input type="checkbox"/> Oil Well	<input type="checkbox"/> Gas Well	<input type="checkbox"/> New Well	<input type="checkbox"/> Workover	<input type="checkbox"/> Deepen	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Same Res'v.	<input type="checkbox"/> Diff. Res'v.
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					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET			SACKS CEMENT			

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
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.

B & D Oil Company
Robert L. Slayton Henry E. Slayton
(Signature) Operators
(Title)
July 1, 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 20 1974

BY W. A. Gussert

TITLE OIL AND 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 well to maintain