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	GAS
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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

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 U.S. GEOLOGICAL SURVEY
 ARTESIA, NEW MEXICO

I. Operator **Leonard Latch**
 Address **507 Texas Commerce Bank Bldg.**
O. C. C.
ARTESIA, OFFICE
Lubbock, Texas 79401

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) **CASINGHEAD GAS MUST NOT BE
 PLACED AFTER 3-1-77
 UNLESS AN EXCEPTION TO rule 306
 IS OBTAINED
 Cf. # 2-215 3-17-77**

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Berry	Well No. 31Y	Pool Name, Including Formation Empire San Andres	Kind of Lease State, Federal or Fee State	Lease No. 025527
Location Unit Letter OG ; 1980' Feet From The East Line and 1968 Feet From The N				
Line of Section 22 Township 17 S Range 27 E , NMPM, Eddy 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"/> Scurlock Oil Co.	Address (Give address to which approved copy of this form is to be sent) 1216 Vaughn Bldg. Midland TX 79701			
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 K	Sec. 24	Twp. 17S	Rge. 27E
Is gas actually connected? When				

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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 10-25-75	Date Compl. Ready to Prod. 12-18-76		Total Depth 2210		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation San Andres		Top Oil/Gas Pay 2150 2154		Tubing Depth 2200'			
Perforations 2154-70 2184-2200					Depth Casing Shoe 2210			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12	8 5/8		424'		150 Sacks			
6	4 1/2		2210'		200 Sx.			

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 12-20-76	Date of Test 12-21-76	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure none	Casing Pressure none	Choke Size Small
Actual Prod. During Test 19	Oil-Bbls. 4.00	Water-Bbls. 15	Gas-MCF Small

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.

Chester London
 (Signature)

Accountant
 (Title)

12-30-76
 (Date)

OIL CONSERVATION COMMISSION

APPROVED **JAN 7 1977**, 19
 BY *W. A. Gussert*
 TITLE **SUPERVISOR, DISTRICT II**

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.