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| TRANSPORTER            | OIL<br>GAS |
| PRODUCTION OFFICE      |            |
| OPERATOR               |            |

# NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)  
Revised 7/1/57

Santa Fe, New Mexico

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

OCT 21 1962

New Well  
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Midland, Texas 10-18-62  
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Chemical Express, Inc. Leonard State, Well No. 2, in NE 1/4 SW 1/4  
(Company or Operator) (Lease)  
N 1/2, Sec. 1, T. 19S, R. 29E, NMPM, Turkey Tract East Pool

County Date Spudded 8-10-62 Date Drilling Completed 9-6-62  
Elevation 3407 Total Depth 2600 PBTD

Please indicate location:

|   |   |   |   |
|---|---|---|---|
| D | G | B | A |
| E | F | G | H |
| L | K | J | I |
| M | N | O | P |

Top Oil/Gas Pay 2531 Name of Prod. Form. Queen

### PRODUCING INTERVAL -

Perforations 2531-2546

Open Hole Depth Casing Shoe 2600 Depth Tubing 2500

### OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls. water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 43 bbls. oil, 43 bbls. water in 24 hrs, 0 min. Size Choke

### GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 250 gal. NE acid sand 750 lbs. A 35000# sand

Casing Tubing Date first new Press. Nil Press. 20 oil run to tanks 10-18-62

Oil Transporter The Permian Corporation

Gas Transporter None

Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved: 19

Chemical Express, Inc.  
(Company or Operator)

By: (Signature)  
(Signature)

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title: Agent

Title: OIL AND GAS INSPECTOR

Send Communications regarding well to:

Name: Chemical Express, Inc.

Address: Box 958, Midland, Texas

|                           |         |
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| TRANSPORTER               | OIL GAS |
| PRORATION OFFICE          |         |
| OPERATOR                  |         |

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

|  |                     |                        |                         |   |   |                      |  |
|--|---------------------|------------------------|-------------------------|---|---|----------------------|--|
| Company or Operator<br><b>Chemical Express, Inc.</b>   |                     |                        |                         | Lease<br><b>Leonard State</b>   |   | Well No.<br><b>2</b> |  |
| Unit Letter<br><b>N</b>  | Section<br><b>1</b> | Township<br><b>19S</b> | Range<br><b>29E</b>     |   | County<br><b>Eddy</b>                           |                      |  |
| Pool<br><b>Turkey Trot East</b>  |                     |                        |                         |   | Kind of Lease (State, Fed, Fee)<br><b>State</b> |                      |  |
| If well produces oil or condensate<br>give location of tanks   |                     |                        | Unit Letter<br><b>0</b> | Section<br><b>1</b>   | Township<br><b>19S</b>                          | Range<br><b>29E</b>  |  |
| Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/><br><br><b>The Permian Corporation</b> |                     |                        |                         | Address (give address to which approved copy of this form is to be sent)<br><br><b>Box 3119, Midland, Texas</b> |   |                      |  |
| Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>   |                     |                        |                         |   |   |                      |  |
| Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>   |                     |                        | Date Connected          | Address (give address to which approved copy of this form is to be sent)  |   |                      |  |

If gas is not being sold, give reasons and also explain its present disposition:

**Presently negotiating with Phillips Petroleum Company**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below) \_\_\_\_\_  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate.. ☐

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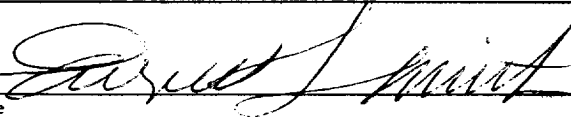
**OCT 21 1962**

**O. C. C.**  
**ARTESIA, OFFICE**

|         |
|---------|
| Remarks |
|---------|

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 18th day of October 1962.

|  |   |  |
|--|---|--|
| OIL CONSERVATION COMMISSION              |   | By   |
| Approved by                              |  |  |
| Title                                    |   | Agent  |
| Company<br><b>Chemical Express, Inc.</b> |   |  |
| Date                                     | Address<br><b>Box 953, Midland, Texas</b>   |  |

**OCT 21 1962**