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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-111
Effective 1-1-65

I. Operator
Miller & Miller Auctioneers, Inc.
Address
2525 Brennan Avenue Fort Worth, Texas 76106
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner AGUA, INC. P. O. Box 1978 Hobbs, New Mexico 88240

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation.	Kind of Lease	Lease No.
Eastcap Queen Pool Unit	10	Caprock Queen	State, Federal or Fee State	
Location Unit Letter E ; 2310 Feet From The North Line and 990 Feet From The West Line of Section 27 Township 14 South Range 31 East , NMPM, Chaves 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 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	Sec. Twp. Pge. 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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	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)

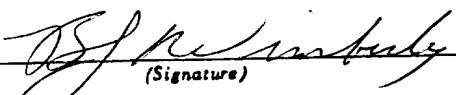
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

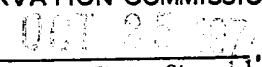
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.

Manager 
(Signature)
(Title)
September 9, 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED  19
BY John Ranyan
Geologist
TITLE

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 allow-

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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
Eastcap Queen	
8. Farm or Lease Name	
9. Well No.	
10	
10. Field and Pool, or Wildcat	
Caprock Queen	
12. County	
Chaves	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

L	GAS	OTHER-
ELL <input type="checkbox"/>	WELL <input type="checkbox"/>	Water Injection
e of Operator		
AGUA, INC.		
ess of Operator		
Box #198, Artesia, New Mexico 88210		
tion of Well		
T LETTER	E	2310 FEET FROM THE North LINE AND 990 FEET FROM
West	LINE, SECTION 27	TOWNSHIP 14 South RANGE 31 East NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	Chaves

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

RM REMEDIAL WORK	PLUG AND ABANDON
<input type="checkbox"/>	<input checked="" type="checkbox"/>
RARILY ABANDON	CHANGE PLANS
<input type="checkbox"/>	<input type="checkbox"/>
R ALTER CASING	
<input type="checkbox"/>	
R	
<input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK	ALTERING CASING
<input type="checkbox"/>	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
<input type="checkbox"/>	<input type="checkbox"/>
CASING TEST AND CEMENT JQB	
<input type="checkbox"/>	
OTHER	
<input type="checkbox"/>	

cribe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed
SEE RULE 1103.

This is a shut-in well. It is proposed to plug and abandon as follows:

Total Depth: 3127', PB to 3125'
Surface Casing: 8-5/8" 24# at 268' w/175 sx.
Prod. Casing: 4 1/2" 9.5# at 3114' w/75 sx.
Open hole from 3114' to 3125'.
Top of Salt: 1250'.

Plugging Program: Set bridge plug above perforations and cap with 35' cement.
Mud hole. Cut off 4 1/2" casing. Place 100' cement plug at top
of stub. If stub is below top of salt, place 100' cement plug
at top of salt. Place 100' cement plug to straddle bottom of
8-5/8" casing. Cap with 10 sacks of cement. Notify Oil
Commission at start of operations.

reby certify that the information above is true and complete to the best of my knowledge and belief.

IM. Ralph L Gray TITLE Consulting Engineer. DATE June 26, 1974
Orig. Signed by
Joe D. Ramey
ED BY Joe D. Ramey TITLE SUPERVISOR DATE June 26, 1974
TIONS OF APPROVAL, IF ANY: