

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

TYPE  
INTER OIL  
GAS  
OR  
LOCATION OFFICE

Minerals, Inc.

P. O. Box 1320, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☒ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
effective 9-18-75

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease State	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Bass State	1	Salt Lake - Yates	State, Federal or Fee State	E 5231
Location				
Unit: Letter	C	660	Feet From The	North Line and 2080
Line of Section		18	Township	20S
Range		33E	, 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)					
Navajo Crude Oil Purchasing Co.	N. Freeman, Artesia, New Mexico 88210					
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.	Rge.	Is gas actually connected?	When
	C	18	20S	33E	No	

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		To, Shuts in		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENT RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SND. L			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

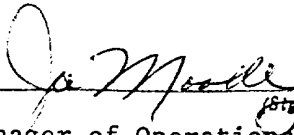
Date First New Oil Run To Tanks	Date of Test	Production Method (Flow, pump, test w/g, etc.)	
Length of Test	Tubing Pressure	Water - Bbl's	Gas - MCF
Actual Prod. During Test	Oil - Bbl's		

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Baro. 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.

  
Manager of Operations & Construction  
(Title)

9-18-75  
(Date)

OIL CONSERVATION COMMISSION

SEP 19 1975

Authorized \_\_\_\_\_, 19\_\_\_\_  
By \_\_\_\_\_  
Checked \_\_\_\_\_

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 change of condition.



**LTR**



**Job separation sheet**

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NEW MEXICO OIL CONSERVATION COMMISSION

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

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
2. Name of Operator Minerals, Inc.	5. State Oil & Gas Lease No. # E 5231
3. Address of Operator P. O. Box 1320 Hobbs, New Mexico 88240	7. Unit Agreement Name
4. Location of Well UNIT LETTER <u>C</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>2,080</u> FEET FROM THE <u>West</u> LINE, SECTION <u>18</u> TOWNSHIP <u>20S</u> RANGE <u>33E</u> NMPM.	8. Farm or Lease Name Bass State
	9. Well No. # 1
	10. Field and Pool, or Wildcat Salt Lake Yates
15. Elevation (Show whether DF, RT, GR, etc.) 3324 GL	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <u>see below</u> <input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

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

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

We are presently conducting an engineering and economic study to determine the feasibility of placing the well back on production.

*Expires 10/1/75*

At present well is shut-in.

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

SIGNED Charles L. Durey TITLE Pres. DATE 10/1/74

APPROVED BY Joe D. Jolley TITLE Dist. DATE OCT 29 1974

CONDITIONS OF APPROVAL, IF ANY: