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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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MAR 5 1980

Operator A. NELSON MUNCY ☒ O. C. D.

Address Box 1037 Artesia, N.M. 88210 ARTESIA OFFICE

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:		
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

Change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE		Lease No.	
Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
<u>Alto State</u>	<u>1</u>	<u>Double L Queen</u>	<u>State, Federal or Fee State</u>
Location		<u>K-4321</u>	
Unit Letter <u>G</u>	<u>1980</u> Feet From The <u>North</u> Line and <u>1900</u> Feet From The <u>East</u>		
Line of Section <u>1</u>	Township <u>15S</u> Range <u>29E</u> NMPM, <u>Chaves</u> County		

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	<u>NAVAJO CRUDE OIL PURCHASING Co.</u>	<u>N. FREEMAN AVE. ARTESIA, N.M. 88210</u>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	<u>PHILLIPS PET. CO.</u>	Address (Give address to which approved copy of this form is to be sent)	
		<u>414 WASHINGTON ODESSA, TEXAS</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>G</u> Sec. <u>1</u> Twp. <u>15S</u> Rge. <u>29E</u>	Is gas actually connected? <u>NO</u> <u>YES</u>	When <u>3-28-80</u>
		<u>Approx. April 15, 1980</u>	

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

COMPLETION DATA		Oil Well		Gas Well		New Well		Workover		Deepen		Plug Back		Same Res'v.		Diff. Res'v.	
Designate Type of Completion - (X)		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Date Spudded		Date Compl. Ready to Prod.		Total Depth		P.B.T.D.											
<u>September 21, 1979</u>		<u>2-24-80</u>		<u>2007'</u>		<u>1987'</u>											
Elevations (DE, RKB, RT, GR, etc.)		Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth											
<u>3873 GR</u>		<u>Queen</u>		<u>1938'</u>		<u>1936'</u>											
Perforations						Depth Casing Shoe											
<u>1938-41' & 1949-50'</u>						<u>2007'</u>											

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>8-5/8"</u>	<u>4-1/2"</u>	<u>340'</u>	<u>225 Circulated</u>
<u>7-7/8" 6 3/4</u>		<u>2007'</u>	<u>500 Circulated</u>

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.)	
<u>OCT 20, 1979</u>	<u>OCT 20, 1979</u>	<u>PUMP</u>	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
<u>1-DAY</u>	<u>10 #</u>	<u>110 #</u>	<u>1"</u>
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
<u>1-BBL</u>	<u>1</u>	<u>1</u>	<u>195 MCF/D</u>

GAS WELL (Phillips)		Bbls. Condensate/MCF		Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	<u>1 bbl - 0 --</u>		<u>50 --</u>	
<u>195,000 CF/D</u>	<u>24-HRS 1-POINT</u>	Casing Pressure (Shut-in)		Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	<u>110 #</u>		<u>1"</u>	
<u>1-POINT</u>	<u>10 #</u>				

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.

A. Nelson Muncy
(Signature)
A. NELSON MUNCY - Owner/Operator
(Title)
2-29-80
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 9 1980, 19
BY W. A. Gressett
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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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OIL CONSERVATION COMMISSION

BOX 1980

HOBBS, NEW MEXICO

APR 8 1980

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE April 3, 1980

This is to notify the Oil Conservation Commission that connection for
the purchase of gas from A. Nelson Muncy,

Alto State ^{#1}, G, 1-15-29, Double L, Associated ^{Queen}
Lease Well Unit S.T.R. Pool

Phillips Petroleum Company, was made on 3-28-80,
Name of Purchaser

Phillips Petroleum Company
Purchaser

K E Moore
Representative - K. E. Moore

Gas Tester Supervisor
Title

cc: To Operator

Oil Conservation Commission - Santa Fe

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APR 7 '80

OIL CONSERVATION DIV.