

DISTRICT II
P.O. Box 8821, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator KAY JAY OIL Co.	Well API No.
Address 885 E. Aberdeen Rd Hagerman NM 88232	
Reason(s) for Filing (Check proper box) New Well ☐ Change in Transporter of: Recompletion ☐ Oil ☐ Dry Gas ☐ Change in Operator ☒ Casinghead Gas ☐ Condensate ☐	
If change of operator give name and address of previous operator ZIA Enterprises P.O. Box 1306 Artesia NM 88210	

I. DESCRIPTION OF WELL AND LEASE

Lease Name TRACT-1	Well No. 3	Pool Name, Including Formation "LL" Queen Assoc	Kind of Lease ☒ State ☐ Federal or Tee	Lease No. K-6772
Location Unit Letter K : 1560 Feet From The South Line and 2500 Feet From The WEST Line Section 24 Township 12-5 Range 29-E , BLM, CHAVES County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil NAVAJO Ref. Co.	or Condensate ☐	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159 Artesia NM				
Name of Authorized Transporter of Casinghead Gas ☐	or Dry Gas ☐	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 F	Sec. 24	Twp. N	Rge. 29	Is gas actually connected? no	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, RI, 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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size posted ID 3 7-31-92
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF Chg of
GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut in)	Casing Pressure (Shut in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature **Fred G. Jones**
Printed Name **FRED G. JONES**
Date **6-22-92**
Title **505-782-3354**

OIL CONSERVATION DIVISION

Date Approved **JUL 29 1992**

By **ORIGINAL SIGNED BY**
MIKE WILLIAMS
Title **SUPERVISOR, DISTRICT II**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for change of operator.