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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 12 1979

Operator LATCH OPERATIONS		O. C. C. ARTESIA OFFICE	
Address Suite 507 Texas Commerce Bank Bldg. - Lubbock, Texas 79401			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☐	Change in Transporter of: Oil ☒ Dry Gas ☐	Change in name of Operator Leonard Latch deceased. Business now carried on by his estate in the name of Latch Operations. J. SDC	
Recompletion ☐	Casinghead Gas ☐ Condensate ☐		
Change in Ownership ☐			

If change of ownership give name and address of previous owner **Leonard Latch, 507 Texas Commerce Bank Bldg. - Lubbock, Texas 79401**

Lease Name Spurck		Well No. 1	Pool Name, including Formation Empire	Kind of Lease State, Federal or Fee State	Lease No. 88318
Location Unit Letter I ; 2310 Feet From The South Line and 990 Feet From The East Line of Section 24 Township 17 Range 27 , NMPM, Eddy County					

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Crude Oil Refining Company		Address (Give address to which approved copy of this form is to be sent) Box 159 - Artesia, New Mexico 88210				
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 I	Sec. 24	Twp. 17	Rge. 27	Is gas actually connected? ☐	When

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

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'n.	Diff. Rest'n.
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

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-Gals.	Water-Bbls.	Gas-MCF

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (flow, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED APR 19 1979	
Jane Latch Agent 2-28-79		BY Mike Williams TITLE OIL AND GAS INSPECTOR	
		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 available data taken on that well in accordance with RULE 110. All portions of this form must be filled out completely for allowable on new and completed 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 conditions.	