	OBSTRUCTION			
¥.	TRANSPORTER OIL ! GAS COPERATOR / PRORATION OFFICE			
	B & D Oil Company	, /	JU	L 2 1974
	P O Box 804 Hobbs, New Mexico 88240		O. C. C. ARTESIA, OFFICE	
	Reason(s) for filing (Check proper box) Other (Please explain) ::ew Wall 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	Paul Slayton, P O Box 1	1936, Roswell, N. M	exico 88201
Ħ.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Fo		Formation	of Lease
	SRLG Unit 27 Red Lake Gray			Federal or Fee State 739
	Unit Letter M ; 990 Feet From The South Line and Feet From The			
	Line of Section 36 Th	ownship 17 South Range	27 EAst , NMPM,	Eddy County
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	45	
	Navajo Refining Co. Pipeline Division N. Freeman			h approved copy of this form is to be sent) ntesia, N. Mex. 88210 h approved copy of this form is to be sentj
				approved copy of this form is to be sent)
	If well produces oil or liquide, give location of tanks.	Unit Sec. Twp. P.ge. I 35 175,27E	Is gas actually connected?	When
IV.	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA			
	Designate Type of Completi	on - (X)	New Well Workover Dee	pen Plug Back Same Restv. Diff. Restv.
	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		<u> </u>	Depth Casing Shoe
			D CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
v.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- able for this depth or be for full 24 hours)			
	Date First New Oll 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
I <u>.</u>				
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
ĺ	Tosting Mothod (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	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		OIL CONSERVATION COMMISSION AUG 2 0 1974	
	above is true and complete to the best of my knowledge and belief.		BY . W. a. Gressett	
7	B& D Oil Company Signaly (Signaly e)		TITLE <u>OIL AND GAS INSPECTOR</u> This form is to be filed in compliance with MULE 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 MULE 111. All sections of this form must be filled out completely for allow- able 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. Secrets Forms C-104 must be filled for each change in multiply	
-	Operators // (Tille)			
-	Deter 1924			
			· · · ·	