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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

RECEIVED

I. Operator Archie M. Speir
Address Post Office Drawer 40 Artesia, New Mexico
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐
Other (Please explain) Change Lease name from Dooley State
If change of ownership give name and address of previous owner Martin Yates, III 323 Canyon Blvd. Artesia N.M.

II. DESCRIPTION OF WELL AND LEASE
Lease Name South Redlake Unit Tract 10 Well No. #3 Pool Name, Including Formation Redlake Grayburg Kind of Lease XXXXXXX Lease No. B-752
Location
Unit Letter N ; 990 Feet From The South Line and 3630 Feet From The East
Line of Section 36 Township 17 South Range 27 East, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Continental Oil Company Address (Give address to which approved copy of this form is to be sent) P. O. Box 367 Artesia, New Mexico
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
None 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 K Sec. 36 Twp. 17 Rge. 27 Is gas actually connected? No When

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 3-3-1948 Date Compl. Ready to Prod. 4-16-1948 Total Depth 1812 P.B.T.D. 1812
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Premier Top Oil/Gas Pay 1735 Tubing Depth 1746
Perforations Open Hole Depth Casing Shoe 1350
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
10 8 1/2 768 Pulled
8 7 1350 50

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 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

GAS WELL
Actual Prod. Test-MCF/D Length of Test Bbls. 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.
Archie M. Speir
(Signature)
Unit Operator
(Title)
December 20, 1966
(Date)
OIL CONSERVATION COMMISSION
APPROVED DEC 21 1966, 19
BY W. A. Gressett
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 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.