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TRANSPORTER	OIL 1 GAS
OPERATOR	1

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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Aug 27 1971

I. REGISTRATION OFFICE

Operator Leonard Latch

Address 1812 Texas Ave. Lubbock, Texas 79301

U. C. C. ARTESIA OFFICE

Season(s) for filing (Check proper box)

New Well ☐ Change in Transporter of: Oil ☒ Dry Gas ☐
Sample ton ☐ Castinghead Gas ☐ Condensate ☐
Change in Ownership ☐

Other (Please explain) Effective date September 1, 1971

Change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Well Name Berry B Well No. 23 Name, including Formation Empire Kind of Lease State Federal Lease No. 125527B

Well Letter B 990 Feet From N Line and M 2310 Feet From The E

Section 25 Township 17S Range 27E NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)

Sealslock Oil Company 1501 Houston Club Bldg. Houston, Texas 77002

Of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)

None

Unit B Sec. 25 Twp. 17S Rge. 27E Is gas actually connected? ☐ When _____

If 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. ☐

Spaced _____ Date Compl. Res'v. to Prod. _____ Total Depth _____ P.B.T.D. _____

Formations (DF, RKB, RT, CR, etc.) _____ Name of Producing Formation _____ Top Oil/Gas Pay _____ Tubing Depth _____

_____ 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 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 New Mexico Oil Conservation Commission have been complied with and that the information given herein is true and complete to the best of my knowledge and belief.

Chester L. Anderson
(Signature)

Bookkeeper
(Title)

Aug. 18, 1971
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
W. A. Grossett
TITLE _____

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.