	DISTRIBUTION ANTA FE	- NEW MEXICO OIL	CONSERVATION OF MISSION STEED ALLOWABL	Fbim C-104
	.S.G.S.	_ 🇹	AND	Sujersedes Old C+104 and C+ Effective 1-1-65
	AND OFFICE	AUTHORIZATION TO T	RANSPORT OIL AND NATURA	Æ ØSEIVED
	I RANSPORTER GAS	6		OCT 9 1979
ì	OPERATOR		9	007 0 107 3
•	Operator  James Warren Han	con		O. C. C. Artesia, Office
•	Address			
	213 No. Paris Recson(s) for filing (Check proper	Artesia. New Mexico 882	Other (Please explain)	
	: ew Well Recompletion	Change in Transpacter of:		
	Change in Ownership		densate	
	If change of ownership give name and address of previous owner	Paul Slayton P	0 Box 1936 Roswell	N Mex 88201
11	DESCRIPTION OF WELL AND LEASE  Lease Name  Well No.; Pool Name, Including Formation  Kind of Lease			
	Hastie 9 Empire V S State, Federal or FeFED L C 045818A			
	Location Unit Letter L ; 2		line and 1000 Feet Fr	Wast
	10	reet rom rne		om The WC3L
	<u> </u>	Township 17S Range 2	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	County
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Name of Authorized Transporter of Oil   or Condensate   Address (Give address to which approved copy of this form is to be sent)			
	Navajo Crude Oil Purch.Co. No. Freeman Ave. 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 Sec. Twp E.ge.	i l	When
	If this production is commingled	with that from any other lease or pool		
IV.	Designate Type of Complet	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.,			
		Name of Producing Formation	Top C11/Gas Pay	Tubing Depth
	Ferfurations			Depth Casing Shoe
	HOLE SIZE		D CEHENTING RECORD	
	AOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
				Pot 3 -79
				- John Mark
	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 allowable. (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable.)			
ĺ	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
ŀ	Actual Prod. During Test	Oil-Bhia.	Water - Bbls.	Gca - MCF
l_				
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bhle. Condensate/MMOF	
				Gravity of Condensate
	Testing Method (pitot, back pr.)	Turing Pressure (Shot-in)	Cosing Frechuse (Ebst-in)	Chele 5,20
I. (	CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION 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 OCT 1	1979,
			BY W, a, Grossett	
			TITLE SUPERVISOR, I	DISTRICT M
;	Luky Wickersham		This form is to be filed in compliance with RULE 1104.	
~	(Sign	ature)	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.	
_	Clerk (Ti	ile)		
	10/5/79	nte)		
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