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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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JAN 28 1969

Operator		KERSEY & COMPANY		O.C.C. ARTESIA OFFICE
Address P. O. Box 316, Artesia, New Mexico 88210				
Reason(s) for filing (Check proper box)				Other (Please explain)
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:		
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Lease Name	Dunn	Lease No.	LC-028772 B	Well No.	3	Pool Name, Including Formation	Artesia	Kind of Lease	State, Federal or Fee	Federal
Location										
Unit Letter	K		1980	Feet From The	South	Line and	1980	Feet From The	West	
Line of Section	12	Township	18S	Range	28E		NMPM,	Eddy		County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Texas-New Mexico Pipe Line Company		Address (Give address to which approved copy of this form is to be sent)		P. O. Box 1510, Midland, Texas	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Phillips Petroleum Company		Address (Give address to which approved copy of this form is to be sent)		11th Floor, Adams Bldg., Bartlesville, Okla 74003	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	12	18	28	Yes	Jan. 5, 1969

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
	Oil and Injection well							
Date Spudded	Sept. 22, 1968	Date Compl. Ready to Prod.	Jan. 1, 1969	Total Depth	2681	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	3617 GR	Name of Producing Formation	Grayburg	Top Oil/Gas Pay	2382-90	Tubing Depth	2500	2390
Perforations	2382-90; 2480-88; Production - 2644-54, to be flooded					Depth Casing Shoe	2680	
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
10"	8 5/8"		377		50 sacks			
8"	7" + 4 1/2"		2484 - 2681		150 sacks			
	4 1/2"		197' below the 7"					
	2 3/8"		2500 and 2390'					

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	Jan. 5, 1969	Date of Test	Jan. 10, 1969	Producing Method (Flow, pump, gas lift, etc.)	Pump
Length of Test	24 hrs.	Tubing Pressure	0	Casing Pressure	190#
Actual Prod. During Test	22 Bbls.	Oil - Bbls.	20	Water - Bbls.	2
				Gas - MCF	3.5

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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 above is true and complete to the best of my knowledge and belief.

Harold Kersey  
(Signature)  
Owner  
(Title)  
January 27, 1969  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 28 1969, 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.

