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LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
Supersedes Old O-104 and O-111
Effective 1-1-65

RECEIVED
OCT 7 1982
O. C. D.
ARTESIA, OFFICE

Operator
Kay Jay Oil Company / (George R. Locker DBA Kay Jay Oil Company)

Address
P.O. Box 2436, Midland, Texas 79702

Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐ Change effective May 1, 1982
Incompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership: ☒

Change of ownership give name and address of previous owner
Kay Jay Oil Company (Fred Jones DBA Kay Jay Oil Company)
Star Route West Box 41, Artesia, New Mexico 88210

DESCRIPTION OF WELL AND LEASE
Lease Name: S. W. Henshaw Premier Unit Well No.: 12 Pool Name, including Formation: West Henshaw Grayburg Kind of Lease: State, Federal or Fee Federal Lease No.: NM 0610

Location
Unit Letter: N 660 Feet From The South Line and 1980 Feet From The West
Line of Section: 18 Township: 16S Range: 30E NMFM, Eddy County

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)
WIW
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
Does well produce oil or liquids, give location of tanks. Unit Soc. Twp. Rge. Is gas actually connected? When

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

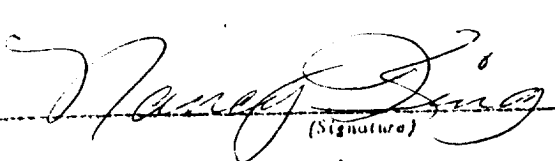
COMPLETION DATA
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Some Res'n. Full Res'n.
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 for this depth or be for full 24 hours)

Oil Well
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/MSCF Gravity of Condensate
Testing Method (pilot, 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 above is true and complete to the best of my knowledge and belief.

Agent
October 7, 1982
(Date)

OIL CONSERVATION COMMISSION
APPROVED OCT 14 1982
Original Signed By
Leslie A. Clements
TITLE Supervisor District II
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 deviate tests taken on the well in accordance with RULE 111.
All portions of this form must be filled out completely for all wells, 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 conditions.