

NO. OF COPIES RECEIVED
DISTRIBUTION
DATE & TIME
FILE
SUBJECT
LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
REGISTRATION OFFICE
ADDRESS

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

Form C-104
Superseding Old C-101 and C-102
Effective 1-1-65

RECEIVED

OCT 7 1982

O. C. D.

ARTESIA OFFICE

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

P.O. Box 2436, Midland, Texas 79702

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

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

SECTION OF WELL AND LEASE		Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
S.W. Henshaw Premier Unit		10	West Henshaw Grayburg	State, Federal or Free Federal	NM 0610

Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East
Line of Section 18 Township 16S Range 30E, NMPM, 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)		
well produces oil or liquids, or location of tanks.	Unit	Soc.	Twp.	Rge.
Is gas actually connected?		When		

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

PRODUCTION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Flow Rest.	Unit, Rge.
Designate Type of Completion - (X)									
Is Spudded	Date Compl. Ready to Prod.	Total Depth		P.D.T.D.					
Locations (D.S., RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
Microfloss		Depth Casing Shoe							

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

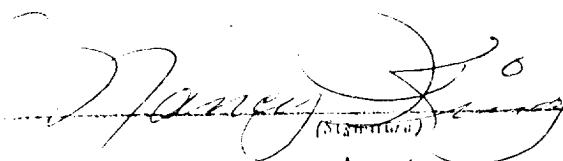
TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top oil able for this depth or be for full 24 hours)

Initial New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Depth of Test	Tubing Pressure	Casing Pressure	Choke Size
Test Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

IS WELL	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Test Prod. Test - MCF/D			
Testing Method (Flow, 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 is true and complete to the best of my knowledge and belief.


Agent
October 7, 1982
(Date)

OIL CONSERVATION COMMISSION

OCT 14 1982

APPROVED _____, 19____
Original Signed By
BY _____
Leslie A. Clements
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 pressure tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable, or 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.