

RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## REQUEST FOR (OIL) (GAS) ALLOWABLE

New Well  
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, New Mexico 8-15-62  
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

NEWMONT OIL COMPANY GEO. ETZ, Well No. 17, in SW 1/4 NW 1/4,  
(Company or Operator) (Lease)  
E 35, T 16, R 30, NMPM, SQUARE LAKE Pool

Eddy

County. Date Spudded 5-24-62 Date Drilling Completed 6-1-62

Please indicate location:

Elevation 3785 KB Total Depth 3205 PSTD -

Top Oil/Gas Pay 2955 Name of Prod. Form. Grayburg San Andres

### PRODUCING INTERVAL -

Perforations 2955-59; 2992-99; 3014-22; 3133-44

Open Hole - Depth Casing Shoe 3203 Depth Tubing 2950

### OIL WELL TEST -

Natural Prod. Test: - bbls. oil, - bbls. water in - hrs, - min. Size -

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 52 bbls. oil, 0 bbls. water in 24 hrs, - min. Size 2"

### GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Frac 35,000 gals refined oil, 42,500 lbs sand

Casing Tubing Date first new Press. - Press. - oil run to tanks August 8, 1962

Oil Transporter CONTINENTAL PIPELINE COMPANY

Gas Transporter

Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved AUG 16 1962, 19

NEWMONT OIL COMPANY  
(Company or Operator)

By: R. Book (Signature)

Title: DISTRICT ENGINEER  
Send Communications regarding well to:

Name: NEWMONT OIL COMPANY

Address: 300 Becker Bldg. Artesia, N.M.

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title: DISTRICT ENGINEER

RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS PRORATION OFFICE OPERATOR		NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO <b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION          TO TRANSPORT OIL AND NATURAL GAS</b>	<b>FORM C-110</b> (Rev. 7-60)
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FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>NEWMONT OIL COMPANY</b>				Lease <b>GEO ETZ</b>		Well No. <b>17</b>	
Unit Letter <b>E</b>	Section <b>35</b>	Township <b>16</b>	Range <b>30</b>	County <b>Eddy</b>			
Pool <b>Square Lake</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>E</b>	Section <b>35</b>	Township <b>16</b>	Range <b>30</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>CONTINENTAL PIPELINE COMPANY</b>				Address (give address to which approved copy of this form is to be sent)  <b>ARTESIA, NEW MEXICO</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

**Small amount of gas produced is used to run pump unit engine.**

REASON(S) FOR FILING (please check proper box)

New Well ..... ☒ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate . ☐

**RECEIVED**


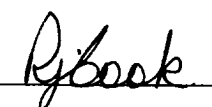
**AUG 15 1962**

**O. C. C.  
ARTESIA, OFFICE**

Remarks
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The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 15th day of August, 19 62.

OIL CONSERVATION COMMISSION		By
Approved by	 <b>OIL AND GAS INSPECTOR</b>	 <b>District Engineer</b>
Title		Company <b>NEWMONT OIL COMPANY</b>
Date	Address <b>300 Booker Bldg., Artesia, N.M.</b>	

**AUG 16 1962**