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TRANSPORTER	OIL
	GAS
OPERATOR	
PERMITS OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

Form C-104
Superseding Old C-104 and C
Effective 1-1-68

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

JUN 30 1969

ARTESIA, NEW MEXICO

Newmont Oil Company

Address
P. O. 1305, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)

New Well ☐ Change in Transporter of ☐
Recompletion ☐ Oil ☒ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Change of lease name

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Geo. Ezz Tract 5	Well No. 17	Pool Name, Including Formation Square Lake G, SA.	Kind of Lease State, Federal or Free Fed.	Lease No. LC-063926
Location Unit Letter E, 2080 Feet From The N Line and 550 Feet From The V Line of Section 35 Township 16S Range 30E, 144PM, Eddy Count				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Refining Co., Pipeline Division	Address (Give address to which approved copy of this form is to be sent) North Freeman, Artesia, New Mexico
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. Rge. F 35 16S 30E
Is gas actually connected?	When No

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	Water	Deepen	Plug Back	Shut-in	Dist. No.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.S.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	BACKS CEMENT

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 of able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Shin.	Water-Shin.

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OIL CON. DIV.

GAS WELL
OTHER WELL

DIST. 2

Actual Prod. Test-MCF/D	Length of Test	Shin. Condensate/Water	Quantity of Condensate
Testing Method (flow, shut-in, etc.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Shut-in

1. 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.

Lawrence J. Lindkuth
(Signature)

Division Superintendent

(Title)

6-27-69

OIL CONSERVATION COMMISSION

APPROVED

JUN 3 1969

BY

W. A. Gracett

OIL AND GAS INSPECTOR

TITLE

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.
All sections 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 or

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	GAS
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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
Circulars 1-1-60

RECEIVED

JUN 30 1969

Operator
Newmont Oil Company

Address
P. O. 1305, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	☐	Change in Transporter of:	
Recompletion	☐	Oil ☒	Dry Gas ☐
Change in Ownership	☐	Crude Oil Gas ☐	Condensate ☐

If change of ownership give name
and address of previous owner

1. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Geo. Etz Tract 5	17	Square Lake G. SA.	State, Federal or Free	LC-063926
Location				
Unit Letter	E	2080	Foot From The	N
Line and		550	Foot From The	
W				
Line of Section	35	Township	16S	Range
30E		, 104PM, Eddy		
County				

2. 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 Refining Co., Pipeline Division	North Freeman, Artesia, New Mexico					
Name of Authorized Transporter of Crude Oil 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.	Range	Is gas actually connected?	When
	F	35	16S	30E	No	

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

3. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Flow Back	Shut In	Drill No.
Depth Specified	Date Compl. Ready to Prod.		Total Depth		P.R.T.D.			
Elevations (DF, RAB, 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	BACKS CEMENT

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

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Shut-in
Amount Prod. During Test	Oil-Blk.	Water-Blk.	Gas-MCF

GAS WELL

WELL WELL

Actual Prod. Test-MCF/D	Length of Test	Blk. Condensate/Barrel	Gravity of Condensate
Testing Method (plot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Shut-in

1. 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.

Harmon J. Liddle
(Signature)
Division Superintendent
(Title)

6-27-69

OIL CONSERVATION COMMISSION

APPROVED
JUN 3 1969
BY W. A. Gressett
OIL AND GAS INSPECTOR
TITLE

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tests taken on the well in accordance with RULE 111.
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wells on new and recompleted wells.
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well name or number, or transportation or other such change of condi

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Address P. O. 1305, Artesia, New Mexico 88210			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☐	Change in Transporter of ☐	Change of lease name	
Recompletion ☐	Oil ☒ Dry Gas ☐		
Change in Ownership ☐	Condensate ☐		

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Geo. Eitz Tract 5	Well No. 17	Pool Name, including Formation Square Lake 6, SA.	Kind of Lease State, Federal or Free Fed.	Lease No. LE-063926
Location Unit Letter E 2080 Feet From The N Line and 550 Feet From The W				
Line of Section 35 Township 16S Range 30E NEPM Eddy Count				

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 Refining Co., Pipeline Division North Freeman, Artesia, New Mexico					
Name of Authorized Transporter of Condensate ☐ 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 F	Sec. 35	Twp. 16S	Rge. 30E	Is gas actually connected? No	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	Shut-in	Well, No.
Date Spotted	Date Compl. Ready to Prod.		Total Depth		P.M.T.D.			
Elevations (SP, RAB, RT, CR, 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 OIL WELL

(Test must be after recovery of usual volume of liquid oil and must be equal to or exceed top oil able for this depth or be for full 24 hours)

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-Shin.	Water-Shin.	Gas-MCF

GAS WELL
WHEN WELL

TESTING METHOD (Flow, back pr.)	Length of Test	Ratio Condensate/MCF	Gravity of Condensate
Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	FILE 605

7. 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.

Harmon J. Ludluth
(Signature)

Division Superintendent

6-27-69

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED

JUN 30 1969

BY

W. A. Grossert

TITLE

OIL AND GAS INSPECTOR

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If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the test results taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for a well on now and completed wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, or transmission or other such change of record.