

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

Form C-134
Supersedes Old C-164 and C-110
Effective 1-1-65

RECEIVED
MAR 22 1965

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1. PRODUCTION OFFICE

Frank Darden and Associates

1522 Fort Worth National Bank Building, Fort Worth, Texas 76102

Reasons for filing (check proper box)

Change in Transporter of:

Oil ☐ Gas ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐

Change of operator effective January 1, 1965

If change of ownership give name and address of previous owner: Previous operator - Newmont Oil Company, Artesia, New Mexico

II. DESCRIPTION OF WELL AND LEASE

Well Name: Johnson 111 ✓

Well No.: 2

Pool Name, including Formation: Square Lake (Grayburg-San Andres)

Kind of Lease: Federal

Section: 28

Township: 16S

Range: 31E

County: Eddy

Feet From The South Line and 660 Feet From The West

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil: Water injection well

Address (Give address to which approved copy of this form is to be sent):

Name of Authorized Transporter of Casinghead Gas: or Dry Gas

Address (Give address to which approved copy of this form is to be sent):

Is gas actually connected? When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
Designate Type of Completion - (X)								
Date Compl. Ready to Prod.								
Name of Producing Formation								
Top Oil/Gas Pay								
Tubing Depth								
Depth Casing Shoe								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. 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)

Producing Method (Flow, pump, gas lift, etc.)	Date of Test	Length of Test	Gravity of Condensate
Producing Method (Flow, pump, gas lift, etc.)	Date of Test	Length of Test	Gravity of Condensate
Tubing Pressure	Casing Pressure	Choke Size	
Oil-Bbls.	Water-Bbls.	Gas-MCF	
Producing Method (pilot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

OIL CONSERVATION COMMISSION

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.

APPROVED APR 1 1965
BY [Signature]
TITLE [Signature]

C. W. Stumhoff
C. W. Stumhoff (Signature)
Manager of Operations
(Title)

March 18, 1965

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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter or other such change of condition.