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	GAS		
PRODUCTION OFFICE			
OPERATOR			

# NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

JUN 25 1963

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

May 8, 1963

(Place)

(Date)

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

J. E. Beddingfield

State

Well No.

6

in SE

1/4

SW 1/4

(Company or Operator)

(Lease)

N

Sec. 36

T. 17-S

R. 27-E

NMPM.

Pool

Unit Letter

Eddy

County. Date Spudded. 3-30-1963

Date Drilling Completed 4-3-1963

Please indicate location:

Elevation 3642

Total Depth 1341

PBTD 1340

Top Oil/Gas Pay 1242 75

Name of Prod. Form.

Penrose

PRODUCING INTERVAL -

Perforations 1242 1/2 - 1327

Open Hole

Depth

Casing Shoe 1341

Depth

Tubing 1275

OIL WELL TEST -

Natural Prod. Test: 1 1/2 bbls. oil, bbls water in 24 hrs, min. Size Open

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of

load oil used): 1 1/2 bbls. oil, bbls water in 24 hrs, min. Size 2 1/2" tub.

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): 28000# Sand 595 bbls oil

Casing Press. 300 Tubing Press. 300 Date first new oil run to tanks 6-15-1963

Oil Transporter Continental Pipe Line Company

Gas Transporter Phillips Petroleum Company

Remarks:

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

Approved JUN 26 1963, 19

J. E. BEDDINGFIELD

(Company or Operator)

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

By: J. E. Beddingfield

(Signature)

Title: Vice President  
Send Communications regarding well to:

Title: OIL AND GAS INSPECTOR

Name: J. E. Beddingfield

Drawer # Artesia, N.M.

Address:

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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>J. E. BEDDINGFIELD</b>				Lease <b>STATE</b>		Well No. <b>6</b>	
Unit Letter <b>N</b>	Section <b>36</b>	Township <b>17</b>	Range <b>27</b>	County <b>EDDY</b>			
Pool <b>EMPIRE</b>				Kind of Lease (State, Fed, Fee) <b>STATE</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>N</b>	Section <b>36</b>	Township <b>17</b>	Range <b>27</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>CONTINENTAL PIPELINE CO.</b>				Address (give address to which approved copy of this form is to be sent)			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> <b>Phillips Petroleum Co.</b>			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:

**in made.**

**Vented**

**No Gas Production until connection**

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

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

Change in Ownership ..... ☐  
 Other (explain below)

Remarks

**RECEIVED**  
**JUN 25 1963**  
**O. C. C.**  
**ARTESIA, OFFICE**

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

Executed this the **15th** day of **June**, 19 **63**.

**OIL CONSERVATION COMMISSION**

Approved by

Title

Date

**OIL AND GAS INSPECTOR**

By

Title

Company

Address

**Box 196 Artesia, New Mexico**