

DISTRIBUTION		
SA	T A F E	
E		
G.S.		
D OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

RECEIVED

MAY 21 1975

I. Operator  
Herman J. Ledbetter  
Address  
1002 Sayles Boulevard  
Abilene, Texas 79605  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter oil ☐  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
CASINGHEAD GAS MUST NOT BE  
FLARED AFTER 7-9-75  
UNLESS AN EXCEPTION TO Rule 306  
IS OBTAINED  
If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Heard "A"	Well No. 2	Pool Name, including formation Square Lake Grayburg SA	Kind of Lease State, Federal or Fee Federal	Lease No. NM 12129
Location Unit Letter L 1650 Feet From The South 660 Feet From The West Line of Section 27 Township 16S Range 30E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing Company Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> NONE	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 175 Artesia, New Mex. 88210 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 K	Sec. 27	Twp. 16	Rge. 30	Actually connected? No	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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.	
Date Spudded 4-23-75	Date Compl. Ready to Prod. 5-9-75	Total Depth 3155		P.B.T.D. 3125					
Elevations (DF, RKB, RT, GR, etc.) 3761 GR	Name of Producing Formation Grayburg San Andres	Gas Pay 2918		Tubing Depth 3090					
Perforations 2918-24, 2963-76, 3086-93					Depth Casing Shoe 3151				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
11	8 5/8		496		100				
7 7/8	4 1/2		3151		200				
2 3/8" 3090									

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)

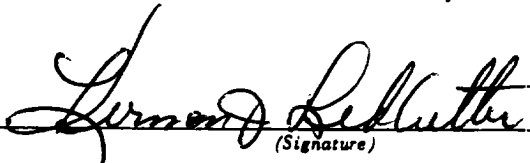
Date First New Oil Run To Tanks 5-9-75	Date of Test 5-14-75	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure 0	Casing Pressure 0	Choke Size
Actual Prod. During Test 35	Oil - Bbls. 23	Water - Bbls. 12 (load)	Gas - MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. 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.

  
(Signature)  
(Title)  
5-16-75  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 23 1975  
BY W. A. Gressett  
TITLE 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 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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.