

DISTRIBUTION	14
SALE	
FILE	
G.S.	
FIELD 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

JAN 26 1976

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
 Change in Ownership Casinghead Gas Other (Please explain):
CASINGHEAD GAS MUST NOT BE FLARED AFTER 3-14-76 UNLESS AN EXCEPTION TO Rule 306 IS OBTAINED

O. C. C.
 ARTESIA, OFFICE

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Section	Kind of Lease	Lease No.
Heard 13 A	13	Square Lake GB-SA	State, Federal or Fee Federal	NM12129
Location	Unit Letter G ; 2310 Feet From The North 1980 Feet From The East			
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"/>	Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		
Navajo Crude Oil Purchasing	None		
Address (Give address to which approved copy of this form is to be sent)		Address (Give address to which approved copy of this form is to be sent)	
North Freeman Artesia, New Mexico 88210			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
	G	27	16
			30
			No

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	Refractured	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					
Date Spudded	Date Compl. Ready to Prod.	Test Depth	F.B.T.D.					
12-27-75	1-14-76	3200	3189					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Gas Pay	Tubing Depth					
GR 3770	Grayburg-San Andres	2934	2994					
Perforations	Depth Casing Shoe							
2934-40, 2979-86, 2991-94, 3011-16, 3117-26	3200							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
11"	8 5/8"	486	100					
7 7/8"	4 1/2"	3200	100					
	2 3/8"	2994						

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
1-14-76	1-15-76	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hours			4
Actual Prod. During Test	Oil-Bbls.	Gas-Bbls.	Gas-MCF
47 Barrels	27	20	5

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Oil-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.

Herman J. Ledbetter
 Operator

1-21-76

(Title)

(Date)

OIL CONSERVATION COMMISSION

JAN 27 1976

APPROVED _____ 19_____
 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.