

Form 10-10
Superior
Litho

AUTHORIZATION TO PURCHASE OIL AND NATURAL GAS

RECEIVED

JAN 31 1977

OPERATOR		3
PRORATION OFFICE		
Operator		
Herman J. Ledbetter		
Address		
1002 Sayles Boulevard		
ARTESIA, OFFICE		
Abilene, Texas 79605		
Reason for change		
New	☒	Change in Transporter
Redrill	☐	Oil
Change in Gas	☐	Assigned Gas

If change in gas, specify gas and under "Assigned Gas" write

JAN 31 1977

CASINGHEAD GAS MUST NOT BE FLARED AFTER 3-1-76

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FLARED AFTER 3-1-76 ✓
UNLESS AN EXCEPTION TO Rule 306
IS OBTAINED

IS OBTAINED

II. DESCRIPTION OF LEASE AND LEASE

Well No.	Doc. Name, Date	Kind of Lease
James Federal	3 Square Lake GB-SA	State, Federal or Fee
		Federal NM 2932
Section	Feet From The	Feet From The
L 330	West 1980	South
26	Township 16S	Range 30E
		NMPM, Eddy

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of the transporter of oil or gas ☒ or Condensate _____
 Navajo Refining Company
 Name of the transporter of Designated Gas _____ or Dry Gas _____
 None

If well or tanks are connected to _____
 give number of tanks _____

Mon.	Tue.	Wed.	Thurs.	Fri.	Sat.	Sun.	Total

When connected? _____

Artesia, New Mexico

IV. COMPLETION DATA					
Designate Type of Completion - (X)		Oil Well _____ X _____ Gas well _____			
Date Started	Date Compl. Ready to Prod.				
<u>12-12-76</u>	<u>12-23-76</u>				
Elevation at Mouth & Depth	Name of Producing Formation				
<u>3781 GR</u>	<u>Grayburg-San Andres</u>				
Perforations					
<u>2934-40, 2976-81, 3002-05, 3007-13, 3127-32</u>					
		TUBING, CASING, AND CEMENT RECORD			
Casing Size	CASING & TUBING SIZE	DEPTH SET			
<u>11</u>	<u>8 5/8"</u>	<u>456</u>			<u>100</u>
<u>7 7/8</u>	<u>4 1/2"</u>	<u>3250</u>			<u>200</u>
	<u>2 3/8</u>	<u>3095</u>			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL			
(Test must be after recovery of total volume of load oil and must be available for this length of time at least 24 hours.)			
Date First New Oil Put To Tanks	Date of Test	Flow, pump, gas lift, etc.)	
12-26-76	12-28-76	Pumping	
Length of Test	Tubing Pressure		Choke Size
24 hours	0	0	
Actual Prod. During Test	Oil - Bbls.		Gas - MCF
28 bbl	18	10 (load)	TSTM
GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Grav. of Gas	Grav. of Gas
		Rate - MMCF	
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. <u><i>Herbert Lee Carter</i></u> (Signature) <u>Operator</u> (Title) <u>1-27-77</u> (Date)	OIL CONSERVATION COMMISSION APPROVED <u>JAN 31 1977</u> <u><i>W. A. Gussert</i></u> SUPERVISOR, DISTRICT II This form is to be filed in compliance with rule _____. A request for allowable for a newly drilled well must be accompanied by a tabulation of production on the well in accordance with Rule 10. All sections of this form must be filled out complete for new and recompleted wells. Fill out only Sections I, II, III, and VI for drilling, well name or number, or transporter, or other such changes indicated.
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