DISTRIBUTION		
SANTA FE	✓	
FILE	✓	✓
U.S.G.S.		
LAND OFFICE		
TRANSPORTER — OIL	✓	
TRANSPORTER — 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
SEP 21 1978
O. C. C.
ARTESIA, OFFICE

Operator
C. E. LaRue and B. N. Muncy, Jr. ✓

Address
P.O. Box 196, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)

New Well	XX	Change in Transporter of:			
Recompletion		Oil		Dry Gas	
Change in Ownership		Casinghead Gas		Condensate	

Other (Please explain)

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

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Hastie	1	Red Lake (Q,G,SA)	State, Federal or Fee Federal	LC045818A

Location
Unit Letter K ; 1980' Feet From The South Line and 1980' Feet From The West

Line of Section 18 Township 17-S Range 28-E , NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil XX or Condensate	Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing	P.O.Box 175,Artesia,N.M. 88210
Name of Authorized Transporter of Casinghead Gas XX or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Co.	Bartlesville, Oklahoma 74004

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	K	18	17S	28E	Yes	9-20-78

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

COMPLETION DATA

Designate Type of Completion — (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
	XX		XX					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
2/8/77	2/18/77	1825'	1825'
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
3569'GL	Queen ~~Grayburg~~	1274' ~~1774'~~	1262'
Perforations			**Depth Casing Shoe**
1774'-1784' w/2SPF & 1274'-1284' w/2SPF			1825'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8-5/8"	312'	125
7-7/8"	4-1/2"	1825'	300
	2 3/8"	1262	

TEST DATA AND REQUEST FOR ALLOWABLE

(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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
2/20/77	2/20/77	Pumping	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24 hrs	250#	250#	2"
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**
30 bbl	5	25	276

Perfs
ed 3
9-29-78
Ret LTNED
& OT PP

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**

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)
Operator
(Title)
September 18, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 29 1978, 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.