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

Form C-101
Superseding Old C-101 and C-102
Effective 1-1-65

SEP 28 1981

I. Operator **W.H. George, Jr.** O.C.D. ARTESIA, OFFICE

Address **Box 1393, Eagle Pass, TX 78852**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☐ Casinghead Gas ☐ Condensate ☐

Change in Ownership ☒

If change of ownership give name and address of previous owner **Maurice Hobson, PO Drawer 538, Alamogordo, NM 88310**

II. DESCRIPTION OF WELL AND LEASE

Lease Name State B	Well No. 6	Pool Name, including Formation East Empire Yates 7-Rivers	Kind of Lease State, Federal or Fee State	Lease No. B-111
Location				
Unit Letter M	330	Feet From The South	Line and 330	Feet From The West
Line of Section 22	Township 17S	Range 28E	NMFM, Eddy	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) PO Drawer 175, Artesia, NM 88210			
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Bartlesville, OK 74004			
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 22	Twp. 17S	Rge. 28E
	Is gas actually connected? yes		When 3/30/79	

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	New Well	Workover	Deepen	Plug Back	Same Resv.	Fill. Resv.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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 oil able 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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

Clarence Smith
(Signature)

Agent

9-25-81
(Date)

OIL CONSERVATION COMMISSION

NOV 27 1981

APPROVED _____, 19

BY *W. A. Gressitt*

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 logs taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all oil or gas and recompleated wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of condition.