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

Form O-104
Supersedes Old O-101 and O-102
Effective 1-1-65

RECEIVED

JUN 28 1979

O. C. C.
ARTESIA, OFFICE

LATCH OPERATIONS

Address Suite 507 Texas Comm. Bank Bldg. - Lubbock, Texas 79401

Reason(s) for filing (Check proper box)

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

Other (Please explain)

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 8-14-79
UNLESS AN EXCEPTION TO Rule 306
IS OBTAINED Ex. #2-333

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Spurck	#4	Empire Yates-Seven Rivers	State, Federal or Fee	State
Location	Unit Letter	I	330	Feet From The East
			2310	Feet From The South
	Line of Section	24	Township	17S
			Range	27E
			NMPM,	Eddy
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
Navajo Crude Oil Company	Box 175 - Artesia, New Mexico 88210					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	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	Sec.	Twp.	Rge.	Is gas actually connected?	When
	I	24	17S	27E		

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 Res'v.	Diff. Res'v.
	XX		XX					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
5-1-89	6-14-79	540	540					
Elevations (DE, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
unavailable	Yates	465 429	535					
Perforations			Depth Casing Shoe					
Open Hole	429-540		429					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12"	10 3/4" 36#	429	200
10"	open hole	540	

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.)	7
6-14-79	6-15-79	Pump	
Length of Test	Tubing Pressure	Casing Pressure	
24 hours	Nil	Nil	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	96	-0-	1 MCF est.

GAS WELL

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

James Latch
(Signature)

Agent
(Title)

6-27-79
(Date)

OIL CONSERVATION COMMISSION

JUN 29 1979

APPROVED

W. A. Gressitt
SUPERVISOR, DISTRICT I

TITLE

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 deviated 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 change of ownership, well name or number, or transporter, or other such change of conditions.