

RECEIVED

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New MexicoDEC 28 1959 (Form C-104)  
Revised 7/1/57REQUEST FOR (OIL) - (~~GAS~~) ALLOWABLENew Well  
Recompletion

ARTESIA, OFFICE

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Roswell, New Mexico

December 24, 1959

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

LEONARD OIL COMPANY

STATE B-514

17

NE

NE ✓

Well No. \_\_\_\_\_, in \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4,

(Company or Operator)

(Lease)

A, Sec. 28, T. 17-S, R. 29E, NMPM, Grayburg-Jackson ✓ Pool

Unit Letter

Eddy

County. Date Spudded 10/27/59

Date Drilling Completed 12/13/59

Please indicate location:

D	G	B	A
E	F	G	H
L	K	J	I
M	N	O	P

330 N + E

Elevation 3547

Total Depth 3254 PSTD

Top Oil/Gas Pay 3152

Name of Prod. Form. San Andres (Keely)

## PRODUCING INTERVAL -

Perforations None

Open Hole 3152 - 3254

Depth Casing Shoe 3152

Depth Tubing 3157

## OIL WELL TEST -

Show of oil incuttings

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_ Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 60 bbls. oil, 0 bbls water in 12 hrs, 0 min. Size 24/64 Choke

## GAS WELL TEST -

Natural Prod. Test: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: \_\_\_\_\_

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 500 gals M-38 acid 20,790 gals oil &amp; 30,000# sand.

Casing Press. 400 Tubing Press. 100 Date first new oil run to tanks 12/24/59

Oil Transporter Texas New Mexico Pipeline

Gas Transporter None- (No connection)

## Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	267	50
5 1/2	3152	200

Remarks: \_\_\_\_\_

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved DEC 28 1959, 19 \_\_\_\_\_

LEONARD OIL COMPANY

(Company or Operator)

By: \_\_\_\_\_

(Signature)

Title General Manager

Send Communications regarding well to:

Name LEONARD OIL COMPANY

Address P.O. BOX 708 - ROSWELL, NEW MEXICO

OIL CONSERVATION COMMISSION

By: \_\_\_\_\_

Title \_\_\_\_\_

OIL CONSERVATION COMMISSION		
ARTICLE 10, SECTION 10, OF THE		
LAW OF 1911		
STATE OF TEXAS		
COUNTY OF _____		
TOWNSHIP OF _____		
OPERATOR	_____	_____
SUCCESSOR	_____	_____
PRODUCER OF OIL	_____	1
STATE LAND OFFICE	_____	_____
U. S. O. S.	_____	_____
TRANSPORTER	_____	_____
FILE	_____	1
BUREAU OF MINES	_____	✓
_____	_____	_____

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

Form C-110  
Revised 7/1/55  
**RECEIVED**

(File the original and 4 copies with the appropriate district office) **DEC 28 1959**

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

ARTESIA, OFFICE

Company or Operator Leonard Oil Company Lease State B-514

Well No. 17 Unit Letter A/S 28 T17S R29E Pool Grayburg-Jackson

County Eddy Kind of Lease (State, Fed. or Patented) State

If well produces oil or condensate, give location of tanks: Unit H S 28 T17S R29E

Authorized Transporter of Oil or Condensate Texas-New Mexico Pipeline Company

Address Midland, Texas

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas \_\_\_\_\_

Address \_\_\_\_\_ Date Connected \_\_\_\_\_

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Flared - No connection.

Reasons for Filing: (Please check proper box) New Well ☒ XX

Change in Transporter of (Check One): Oil ( ) Dry Gas ( ) C'head ( ) Condensate ( )

Change in Ownership ( ) Other ( )

Remarks: \_\_\_\_\_ (Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 24th day of December, 19 59.

By *Fowler King*

Approved DEC 28 1959 19

Title General Manager.

OIL CONSERVATION COMMISSION

Company Leonard Oil Company

By *M. L. Armstrong*

Address Box 708 - Roswell, New Mexico

Title OIL AND GAS INSPECTOR

# OIL CONSERVATION COMMISSION

## ARTERIA DISTRICT OFFICE

MacArthur, Dec 1, 1941

DD Form 1

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