30-015-04039

OGRIN 3080 PROP 2391 2001 57570

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649310-0 643830-C 643830-W

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3961 9 **H**et,

STATE OF NEW MEXICO	OIL CONSERVA		Form C-104 Revised 10-1-78				
	р. О. ВО Santa Fe, Nev	X 2088 V MEXICO 87501	RECEIVED				
U 8.0.8.	REQUEST FO	R ALLOWABLE					
TRANSPORTER OIL /	A	ND PORT OIL AND NATURAL GAS	JUN 2 1980				
Operator Operator DIDNETTOTICO IN	jC _	/	ARTESIA, OFFICE				
Address	BUARFIT OF DOOL, THE						
	Reason(s) for filing (Check proper boz) Reason(s) for filing (Check proper boz) Other (Please explain)						
New Well Recompletion Change in Ownership	Change in Transporter ol: Oil Dry Ga Casinghead Gas Conder	• \square change in ope	mership change, but rator name.				
I change of ownership give name and address of previous owner	Windfohr Oil Company,	Box #198, Artesia, Nev	/ Mexico 88210				
DESCRIPTION OF WELL AND	I.E.ASE	ormation Kind of Le	ase Lease No.				
Jackson "B"	17 Square Lake	State, Fed	eral or Fee Federal NM-2747				
Unit Letter	560 Feet From The south Lin	e and Feet Fro	west				
Line of Section 1 To	wmahlp 17S Range	30Е , _{ММРМ} , Ес	ld y County				
DESIGNATION OF TRANSPOR Name of Authorized Transporter of CL Nava jo Refining Co.	TER OF OIL AND NATURAL GA	Address (Give address to which ap Artesia, N. Mex. 882	proved copy of this form is to be sent) 210				
Name of Authorized Transporter of Ca Continental Oil Com	isinghead Gas 🗂 or Dry Gas 🗍		proved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. P 1 17 30	1:- ;	When 12-57				
If this production is commingled wi . COMPLETION DATA	ith that from any other lease or pool,						
Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.				
Date Spuddød	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
Perforations			Depth Casing Shoe				
		CEMENTING RECORD	SACKS CEMENT				
HOLESIZE	CASING & TUBING SIZE	DEPTH SET					
. TEST DATA AND REQUEST F OIL WELL	OR ALLOWABLE (Test must be a able for this de	pth or be for full 24 hours)	oil and must be equal to or exceed top allow				
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga.	s IIjt, Ecc.)				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size				
Actual Prod. During Test	Oil-Bble.	Water - Bbls.	Gas - MCF				
GAS WELL							
Actual Frod. Teet-MCF/D	Longth of Test	Bbls. Condensate/MMCF	Gravity of Condensate				
Teeting Method (piror, back pr.)	Tubing Pressure (Shut-in)	Casing Pressue (Shut-in)	Choke Size				
. CERTIFICATE OF COMPLIAN		11	ATION DIVISION				
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY_ Way Desset					
			A, DISTRICT H				
Carl I Pray		This form is to be filed in compliance with MULE 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					
Consulting Enginee		tests taken on the well in accordance with NUCL 1155					
June 1, 1980	iile)	able 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.					
()	ole)	Separate Forms C-104 r completed wells.	nust be filed for each pool in multiply				

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	STATE OF NEW MEXICO	_			
EN	RGY AND MINERALS DEPARTMEN				
	10. 07 COPIES SECENTS 3	OIL CONSE	RVATION DIV	ISION	Fora C-103
	DISTRIBUTION	Ρ.	O, BOX 2088		Revised 10-1-78
	SANTA PE	SANTA FE	, NEW MEXICO 87	501	
	FILE				5a. Indicate Type of Leuse
	U.S.G.S.		REC	EIVED	, State Federal Fee
	LAND OFFICE				5. State Oli 6 Gas Lease No.
	OPERATOR /		400	0 1070	NM-2747
				- 9 1979	
	SUNDRY	NOTICES AND REPOR	TS ON WELLS	NT RESERVOIR,	***************************************
	(DO NOT USE THIS FORM FOR PLICATIO	IN FOR PERMIT -" (FORM C-101	FOR SUCH PROPOSALS.	C.C.	7. Unit Agreement Name
1.			ARTES	IA, OFFICE	
	WELL X WELL	0THER-			. B. Farm or Lease Name
2. N	ime of Operator				
	WINDFOHR OIL COMPAN	NY V			Jackson "B"
3. A	ldress of Operator				9. Well No.
	Box #198, Artesia,	New Mexico 88210			17
4. L	ocation of Well				10. Field and Pool, or Wildcat
	м	660 FEET FROM THE	outh	660	Square Lake
	UNIT LETTER	FEET FROM THE	ULULI LINE AND		
			170	201	
	THE WEST LINE, SECTION	N TOWNSHIP	1/5 RANGE	<u>30E</u> NMPM.	<u> </u>
~~	mmmmmm	The Flowetter (Show	whether DF, RT, GR, etc.		12. County
$\prime\prime\prime$		15. Elevation (Show	whether Di, its, ou, ou	•/	Eddy
$\prime \prime \prime$					
16.	Check A	ppropriate Box To Ind	icate Nature of Noti	ice, Report or Otl	ner Data
	NOTICE OF IN		l	SUBSEQUENT	REPORT OF:
	FORM REMEDIAL WORK	PLUG AND ABAN	DON REMEDIAL WORK		ALTERING CASING
			COMMENCE DELL	LING OPHS.	PLUG AND ABANDONMENT
	PORARILY ABANDON	CHANGE PLANS	CASING TEST AN	D CEMENT JOB	
PUL	L OR ALTER CASING	•	OTHER Br	adenhead to su	rface X
	DTHER		·		
	Describe Dropped or Completed Ope	erations (Clearly state all pert	inent details, and give per	rtinent dates, including	estimated date of starting any proposed

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of stating any proposed work) SEE RULE 1103.

Conventional bradenhead piped to surface with 2" valves.

Witnessed by: N.M.O.C.C. on Feb. 27, 1979.

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

SIENED_ Rayford Starkey	Production Superintendent	DATE March 15, 1979
APPADYLD IN Mike Williams	TITLE OIL AND GAS INSPECTOR	DATE APR 3 0 1979

CONDITIONS OF APPROVAL, IF ANY