STATE OF NEW MEXICO			Form C-10 Revised 1	
GY AND THE BALG DEPARTMENT	OIL CONSERVA	TION DIVISION	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
\$118 7 M HW 1/1 1/1 M	RECEIVED P. O. 110			
AMIA PE	SANTA PE, NEW	MEXICO 87501		
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U 5,U.6,	AUG 2 4 1982			
LAND OFFK F	REQUEST FOR			
TRANSPORTER		ND		
OPPMAT (IR	RANAST OF HOBBINSHIPM	TORT OIL AND NATURAL GA		
PROBATION OFFICE	7			
·				
J. Cleo Th	ompson			
	lic Bank Tower, Dallas,	Texas 75201		
Resim(s) for filing (Check proper box)	IIC Ballk Hwel,	Other (Please explain)		
Now Well	Change in Transporter of:			
Recompletion	OII Dry Co	• 🔲		
Change in Ownership XX	Cosinghead Gas Conden	neate		
		·	•	
If change of ownership give name	Newmont Oil Company, P.	O. 1305. Artesia Ne	Mexico 88210 -	
and address of previous owner				
DESCRIPTION OF WELL AND I	EASE		<u> </u>	Lease No.
Lease Name	Well No. Pool Name, Including F	· · · · · · · · · · · · · · · · · · ·		
Leonard "E"	8 Square Lake G	. SA	ederal or Fee FED LC 0	<u>60325</u>
Location				•
	30 Feel From The N Lin	e and Feet :	From The W	
Unii Letter F : 198				_
Line of Section 4 Tow	mahip 17 Range 30	, NMPM,	Eddy	County
DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	Address (Give address to which	served come of this form is	to be sent!
None of Authorized Transporter of Oil	or Condensate	Address (Give address to which	approved copy of this form is	,
Navajo Refining Co., Pi	peline Division	North Freeman, Arte	sia. New Mexico	to be sent)
Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Cive address to which	approved copy of this form is	•
			When	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually connected?	1 711011	
give location of tanks.		No No	<u> </u>	
If this production is commingled wit	h that from any other lease or pool,	give commingling order numbe	r:	
COMPLETION DATA		New Well Workover Deep		s'v. Diff. Res
	Oil Well Gas Well	New Hell Holzover		1
Designate Type of Completio		Total Depth	P.B.T.D.	
Date Spudded	Date Compl. Ready to Prod.	Total Deptil		
		Top Oil/Gas Pay	Tubing Depth	
Lievations (DF, RKB, RT, GR, etc.)	*lame of Producing Formation	Top Onyous Pay		
			Depth Casing Shoe	
Perforations				
		- SEVENTING DECORD		•
		D CEMENTING RECORD	SACKS CE	MENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		
	<u> </u>			
			م مدامین ما بدین کی در	exceed too all
TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	ofter recovery of total volume of la epth or be for full 24 hours)	ad on and must be educate or	
OIL WELL		Producing Method (Flow, pump.	sas lift, etc.)	
Date First New Oil Run To Tanks	Date of Test			
		Casing Pressure	Choke Size	
Length of Teel	Tubing Pressure	Consider the control of the control		
		Water - Bbls.	Gas-MCF	
Actual Prod. During Test	Oil-Bble.	HOLEL - DAIS.		
<u></u>				

1. CERTIFICATE OF COMPLIANCE

GAS WELL

Actual Frod. Tool-MCF/D

leeting Method (pitot, back pr.)

131

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.

Length of Test

Tubing Presewe (Shut-in)

•	•	
- Jae's	Connady	
Agent	(Signature)	
	(Tule)	
7-7-82	Lymax	_

(Dote)

OIL CONSERVATION DIVISION

Bbls. Condensate/MMCF

Cosing Pressure (Shut-in)

APPROVED, 19
BY
TITLE

Gravity of Condensate

Choke Size

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepens; well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.

All sections of this form must be filled out completely for allow 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 Separate Forms C-104 must be filed for each pool in multiple

Form C-104 Revised 10-1-78 DOIX3M WILL TO BEATS THE HIGY AND TORES DEPARTMENT RECEIVED ONSERVATION DIVISION P. O. BOX 2088 AUG 24 1987 A ITE, NEW MEXICO 87501 018 1 M IP UT 10 M ----* 11. 2 W 8.U.S. LAND DEFRE O. C. D. REQUEST FOR ALLOWABLE AND TRAMSPURTER DAL AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS OPPRATOR PROBATION OFFICE J. Cleo Thompson A44:+ 88 4500 Republic Bank Tower, Dallas, Texas 75201 Other (Please explain) Rees in(s) for liling / Check proper Change in Transporter of: \square New Well Dry Gos Condensate Casinghead Gas Change in Ownership If change of ownership give name and address of previous owner ____ Newmont Oil Company, P. O. 1305, Artesia, New Mexico 88210 i. DESCRIPTION OF WELL AND LEASE. | Well No. | Pool Name, Including Formation Legse No. Kind of Lease State, Federal or Fee FED IC 060325 Square Lake G. SA Leonard "E" 8 Location W 1980 N 1980 Feet From The F Feet From The Unit Letter County Eddv Range 30 . NMPM, 17 Township Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) None of Authorized Transporter of Cil XX Navajo Refining Co., Pipeline Division
Name of Authorized Transporter of Casinghead Gas or Dr North Freeman, Artesia, New Mexico.
Address (Give address to which approved copy of this form is to be sent) or Dry Gas When is gas actually connected? Rge. Unit If well produces oil or liquids, give location of tanks. No If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Same Resty, Diff. Resty Deepen Plug Back Workover Gas Well Oil Well Designate Type of Completion - (X) P.B.T.D. Date Compl. Ready to Prod. Total Depth Tubing Depth Top Oil/Gas Pay lame of Producing Formation Llevellone (DF. RKB, RT. GR. etc.) Depth Casing Shoe Periorations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE Producing Method (Flow, pump, gas lift, etc.) OIL WELL Date of Test Date First New Oil Run To Tanks Choke Size Cosing Pressure Tubing Pressure Length of Test Gas-MCF Water - Bbls. Oil - Bble. Actual Prod. During Test

I. CERTIFICATE OF COMPLIANCE

GAS WELL

7-7-82

Actual Frod. Tool-MCF/D

leeting Method (pitot, back pr.)

1.

I herrby 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.

Length of Test

Tubing Piecewe (shut-in)

(e; la maria	
Agent	(Sienaiwe)	
	(7 itle)	

(Dute)

OIL CONSERVATION DIVISION

Bbls. Condensate/MMCF

Cosing Pressue (Shut-in)

APPROVED_ BY_ TITLE _

Gravity of Condensate

Choke Size

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despens well, this form must be accompanied by a tabulation of the deviatio

All sections of this form must be filled out completely for allow 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 Separate Forms C-104 must be filed for each pool in multiple ł.

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- AND OFFRE	OIL			
TRAMSPORTER	DAG	-	<u> </u>	1
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RECEIVEDONSERVATION DIVISION

P. O. BOX 2088

AUG 25/1982 FE, NEW MEXICO 87501

O. C. D. REQUEST FOR ALLOWABLE

PROPATION DEFICE	AUTIORIZATION TO TRANSI	PORT OIL AND NATU	RAL GAS		
Chetatot	hamaan		· · · · · · · · · · · · · · · · · · ·		
J. Cleo T	-				
Restun(s) Tor Tiling (Check proper box	blic Bank Tower, Dallas,	Texas 75201 Other (Please	e esplain)		
New Well	Change in Transporter of:		•		
Aecompletion	Oil Dry Go	71			
Change in Ownership XX	Casinghead Gas Conder	nadie [_]			
If change of ownership give name and address of previous owner	Newmont Oil Company, P.	0. 1305, Artesi	a New Mos	vico 88210	
DESCRIPTION OF WELL AND	LEASE				
Lease Name	Well No. Pool Name, Including F	ormation	Kind of Lease State, Federal		Lease No.
Location			<u> </u>		
Unit Letter;;	Feet From TheLin	ne and	Feel From T	he	
	wnship . Range	, NMPA	<i>A</i> ,	Eddy	County
Line of Section					
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS Address (Give address	to which approv	red copy of this form is t	o be seni)
Name of Authorized Transporter of Cil Navajo Refining Co., P.		North Freeman	. Artesia.	New Mexico	
Name of Authorized Transporter of Car	singhead Gas or Dry Gas	Address (Give address	to which approv	ed copy of this form is t	o be sent)
	Unit Sec. Twp. Rge.	is gas actually connec	ted? Whe	תי	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rec.	No	<u> </u>		
If this production is commingled wi	th that from any other lease or pool,	give commingling orde	r number:		
COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Res	v. Dill. Resty
Designate Type of Completion				I B B T D	<u> </u>
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	
Llevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth	
	<u> </u>	<u> </u>		Depth Casing Shoe	
Periorations					
	TUBING, CASING, AN			SACKS CE	
HOLE SIZE	CASING & TUBING SIZE	DEPTH S	ET	SACKS CE.	
				<u> </u>	
		after recovery of total vol	luma of load oil	and must be equal to or	exceed top allou
TEST DATA AND REQUEST FOIL WELL	OR ALLOWABLE Trest must be able for this d	lepth or be for full 24 hou	r#)		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Fic	w, pump, gas 11	ji, eicij	
Length of Teel	Tubing Pressure	Casing Pressure	•	Choke Size	
Length of Foot		Wgier - Bbla.		Gas - MCF	
Actual Prod. During Test	Oil-Bble.	Water- Date.			
	1				
GAS WELL		Bbis, Condensate/MM	CF	Gravity of Condensat	•
Actual Frod. Tool-MCF/D	Length of Test				
lesting Method (pitot, back pr.)	Tubing Piecewe (shat-in)	Coaing Pressure (She	rt-in)	Choke Size	
- TO A TO A COUNTY IAN	CE	OIL	CONSERVA	TION DIVISION	
CERTIFICATE OF COMPLIAN	ICE				. 19
I hereby certify that the rules and	regulations of the Oil Conservation	* 11			
Division have been compiled with above is true and complete to the	he best of my knowledge and belief.	3 8			
•		TITLE			
		This form is	to be filed in	compliance with AUL	g 1104.
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Agent	nalwe)	II a cara a tan an ah	a wall in acco	ordance with NULK 1 ust be filled out comp	
	(ale)	able on new and	recompleted w	, 111 4 1/1 for ch	anves of owner
7-7-82	N	II . 11	has of transpo	II, III, and VI for charter, or other such cha	-
μ	Dute)	Separate For	rins C-104 inu	et he filed for each	boot tu maitibi

DOIXON WITH TO BEATS Form C-104 Revised 10-1-78 DEPARTMENT OIL CONSERVATION DIVISION RECEIVED P. O. HOX 2088 tite to minute to de SANTA FE, NEW MEXICO 87501 -----, i. i AUG 24 1982 LAND DEFE REQUEST FOR ALLOWABLE DIL AND -D. AUTUORIZATION TO TRANSPORT OIL AND NATURAL GAS OFFRATOR PROBATION OFFICE l. Cleo Thompson J. Address 4500 Republic Bank Tower, Dallas, Texas 75201 Other (Please explain) ne in Transporter of: New Well Dry Gos OIL Recompletion Condensate Casinghead Gas Change In Ownership If change of ownership give name Newmont Oil Company, P. O. 1305, Artesia, New Mexico 88210 and address of previous owner. i. DESCRIPTION OF WELL AND LEASE Lease No. Kind of Lease well No. Pool Name, Including Formation State, Federal or Fee Location Feet From The_ _ Line and __ County Eddv NMPM, Township Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cil XX North Freeman, Artesia, New Mexico. Address (Give address to which approved copy of this form is to be sent) Navajo Refining Co., Pipeline Division Name of Authorized Transporter of Casinghead Gas or Dry Gas When Rge. Is gas octually connected? Twp. Unit Sec. If well produces oil or liquids, No give location of tanks If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Same Resty, Dill. Res Plug Bock Workover Deepen Oil Well Gas Well New Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spudded Tubing Depth Top Oil/Gas Pay "lame of Producing Formation Llevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Casing Pressure Tubing Presews Length of Teel Gas - MCF Water - Bbls. Oil-Bble. Actual Prod. During Test GAS WELL Gravity of Condensate Bble. Condensate/MMCF Length of Test Actual Frod. Toot-MCF/D Cooing Pressue (Shut-in) Choke Size Tubing Pressue (shut-la) leeting Method (pitot, back pr.) OIL CONSERVATION DIVISION I. CERTIFICATE OF COMPLIANCE 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. APPROVED_ BY. TITLE _ This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tebulation of the deviatio tests taken on the well in accordance with RULE 111. (Signature) All sections of this form must be filled out completely for allow

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

Separate Forms C-104 must be filed for each pool in multiple

Agent

7-7-82

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(Dute)

STATE OF NEW MILARO Revised 10-1-/8 JERGY AND MICH HALS DEPARTMENT OIL CONSERVATION DIVISION post month ton P. O. DOX 2088 RECEIVED SANTA FE, NEW MEXICO 87501 AUG 24 1982 REQUEST FOR ALLOWABLE w s.u.s. LAND DEFKE TRANSPORTER OIL AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS -U7-10101 J. Cleo Thompson Add: + 8.8 Resim(s) Tor liling (Check proper box) 75201 Da<u>llas, Texas</u> Other (Please explain) ge in Transporter of: Now Well Dry Gos Oil Recompletion Condensate Cosinghead Gas Change In Ownership If change of ownership give name Newmont Oil Company, P. O. 1305, Artesia New Mexico 88210 and address of previous owner. DESCRIPTION OF WELL AND LEASE. | Neil No. | Pool Name, Including Formation Leose N Kind of Lease State, Federal or Fee FED LC 06D325 8 Square Lake G. SA Leonard "E" Location 1980 W 1980 _ Feel From The_ N ___Line and ___ Eddy . NMPM Range 30 17 Township Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) None of Authorized Transporter of Cil XX North Freeman, Artesia, New Mexico
Address (Cive address to which approved copy of this form is to be sent) Navajo Refining Co., Pipeline Division
Name of Authorized Transporter of Cosinghead Cos or Dry Gas When is gas actually connected? Roe. Twp. Sec. Unit If well produces oil or liquids, give location of tanks. No If this production is commingled with that from any other lease or pool, give commingling order number: Same Res'v. Dill. Re Plug Bock COMPLETION DATA Workover Deepen New Well Gas Well Oil Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. Dote Spudded Tubing Depth Top Oil/Gas Pay lame of Producing Formation Llevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top eable for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE Producing Method (Flow, pump, gas lift, etc.) OIL WELL Date of Test Date First New Oil Run To Tanks Choke Size Coaing Pressure Tubing Pressure Length of Test Gas - MCF Water - Bbls. Oil - Bble. Actual Prod. During Test Crovity of Condensate GAS WELL Bble. Condensate/MMCF Longth of Tost Actual Frod. Tool-MCF/D Choke Size Cooling Pressure (Shut-in) Tubing Piecewe (shat-in) Teeting Method (pitot, back pr.) OIL CONSERVATION DIVISION II. CERTIFICATE OF COMPLIANCE APPROVED_ 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. TITLE _ This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devi-tests taken on the well in accordance with RULE 111. made BUNDIWE All sections of this form must be filled out completely for a able on new and recompleted wells. Agent Fill out only Sections I. II. III, and VI for changes of owell name or number, or transporter, or other such change of cond (Tule) 7-7-82 Senarate Forms C-104 must be filled for each pool in mu

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