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O.S.G.S.
LAND OFFICE
TRANSPORTER OIL GAS
OPERATOR
PRODUCTION OFFICE

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

Form C-104
Superseding Old C-101 and C-111
Effective 1-1-65

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FEB 14 1978

Operator
Holly Energy, Inc. ✓
Address
2001 Bryan Tower, Suite 2680, Dallas, Texas 75201
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of: Oil ☒ Dry Gas ☐
Renewal ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐ Other (Please explain)
Effective Feb. 1, 1978
from T.N.M.

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE
Lease Name Brigham B Well No. 2 Pool Name, including Formation Fren Seven Rivers Kind of Lease State, Federal or Fee Fed Lease No. LC28992
Location
Unit Letter M ; 330 Feet From The South Line and 990 Feet From The West
Line of Section 22 Township 17S Range 30E, NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Navajo Crude Oil Purchasing Company Address (Give address to which approved copy of this form is to be sent)
Box 175, Artesia, N. M. 88210
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Continental Oil Company Address (Give address to which approved copy of this form is to be sent)
Box 2197, Houston Texas 77001
If well produces oil or fluids, give location of tanks. Unit N Sec. 22 Twp. 17 Rge. 30 Is gas actually connected? Yes When 8-6-2

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA
Designate Type of Completion - (X)
Oil Well Gas Well New Well Workover Deepen Plug Back Same Res't. Diff. Res't.
Date Spudded 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

TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE (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.)
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/MCF Gravity of Condensate
Testing Method (flow, back pr.) Tubing Pressure (shut-in) Casing Pressure (shut-in) Choke Size

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.
Robert H. Loyd
Supt. Production & Exploration
Feb. 8, 1978

OIL CONSERVATION COMMISSION
APPROVED FEB 20 1978
BY W. A. Gressett
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 well test taken on the well in accordance with RULE 111.
All entries on this form must be filled out completely for all wells except in the case of a well.
Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter, or other such change of conditions.