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

Form C-104  
Supersedes Old C-104 and C-1  
Effective 1-1-65

GAS RECEIVED BY
DEC 08 1983
O. C. D.
ARTESIA, OFFICE

Operator Ray Westall ✓	
Address P.O. Box 4 Loco Hills, New Mexico 88255	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change In Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change In Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Last Chance Fed.	Well No. 1	Pool Name, Including Formation Grayburg Jackson 11-8-83	Kind of Lease State, Federal or Fee Fed.	Lease No. LC04999A
Location				
Unit Letter G	: 1650 Feet From The	N Line and	2310 Feet From The	E
Line of Section 17	Township 17S	Range 31E	NMPM, Eddy	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Navajo Crude Oil Purchasing Co.	P.O. Drawer 159 Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Conoco, Inc.	P. O. Box 1267 Ponca City, OK 74603					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 17	Twp. 17S	Rge. 31E	Is gas actually connected? Yes	When 7-20-83

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 (X)	Gas Well	New Well (X)	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 4-5-83	Date Compl. Ready to Prod. 7-8-83	Total Depth 3612'	P.B.T.D. 3612'					
Elevations (DF, RKB, RT, GR, etc.) 3732.2 GR	Name of Producing Formation Grayburg	Top Oil/Gas Pay 1806	Tubing Depth 3300'					
Perforations See attachment	2806-3600	Depth Casing Shoe 3612'						

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	574'	400 sx Class C. 1/4"
			Cello-seal
7 7/8"	5 1/4"	3612'	500 sx Halliburton-Li
	2 3/8"	3300'	2% CaCl. 500 sx 50/50 Po

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 7-10-83	Date of Test 7-10-83	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size Post 10-2 1-13-84 Comp. Bk.
Actual Prod. During Test 25	Oil-Bbls. 10	Water-Bbls. 15	Gas-MCF 30

GAS WELL

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

Ray Westall  
(Signature)  
Operator  
(Title)  
12-6-83  
(Date)

OIL CONSERVATION COMMISSION

JAN 10 1984

APPROVED \_\_\_\_\_, 19\_\_\_\_  
Original Signed By  
BY \_\_\_\_\_ Leslie A. Clements  
Supervisor District II  
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 deviation 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 changes of owner, well name or number, or transporter, or other such change of condition.