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NEW MEXICO OIL CONSERVATION COMMISSION
**REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**
DEC 19 1972
OIL & GAS
ARTESIA, NEW MEXICO

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

I. Operator
JONES & HAILE ✓
Address
P. O. DRAWER II, ARTESIA, NEW MEXICO 88210
Reason(s) for filing (Check proper box).
New Well ☐ Change in Transporter of ☐
Recompletion ☐ Oil ☒ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain): *from the Permian Corp.*
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Well Name, including Formation	Kind of Well	Lease No.
J. R. LEE	1	ATOKA, SAN ANDRES	State, Rental or Fee <i>Free STATE</i>	
Location				
Unit Letter	B	1980 Feet from The	E Line and	660 Feet from The
Line of Section		22	Township	18
Range		26	County	EDDY

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	Name of Authorized Transporter of Casinghead Gas	Name of Authorized Transporter of Condensate
NAVAJO CRUDE OIL PURCHASING COMPANY		
Address (Give address to which approved copy of this form is to be sent)		
P. O. BOX 159 ARTESIA, N.M. 88210		
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	B	22
	18	26
	NO	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	Flow Well	Water Well	Deepen	Log Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Comp. Ready to Prod.		Casing Depth		P.B.T.D.			
Elevations (DF, RKB, RL, GR, etc.)	Name of Producing Formation		Casing Depth		Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. 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	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. 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.

[Signature]
PARTNER
12/19/72
(Date)

OIL CONSERVATION COMMISSION
APPROVED DEC 20 1972
BY *W. A. Gressett*
TITLE OIL AND GAS INSPECTOR
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 deviated 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.
Separate Forms C-104 must be filed for each pool in multiple completions.