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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS G					
1.	OPERATOR) PRORATION OFFICE	JUL 3 1973			
	BEARING SERVICE & SUPPLY CO. INC.				
	P. O. BOX 100, ARTESIA, NEW MEXICO 88210				
	Reason(s) for filing (Check proper box) Other (Please explain)				
	New We!l	Change in Transporter of: Oil X Dry Ga		n Corporation	
	Change in Ownership	Casinghead Gas Conder	nsate 🔲 TO: Navajo	Crude Oil Purchasing	
	If change of ownership give name and address of previous owner	Alfred S. Blauw,	Co. P. O. Box 700, Rosw	ell, New Mexico 88201	
II. DESCRIPTION OF WELL AND LEASE Lease Name					
	Lease Name KLEEMAN	Well No. Pool Name, Including F Dayton-San		20000	
	Location				
	0	mship 188 Range	26E , NMPM,	Eddy County	
	Elife of Section 2 10%		202	South State of the	
111.	DESIGNATION OF TRANSPORT		Address (Give address to which appr	oved copy of this form is to be sent)	
	 Navai o Crude Oil Pu	rchasing Co	Artesia, New Mex	1co - North Freeman	
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which appr	oved copy of this form is to be sent)	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. P. 27 185 26E	Is gas actually connected? W	hen	
	If this production is commingled wit COMPLETION DATA		give commingling order number:		
	Designate Type of Completio	on - (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
	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	
	Periorations				
		T	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load of able for this depth or be for full 24 hours)				l and must be equal to or exceed top allow-	
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
		Tubing Pressure	Casing Pressure	Choke Size	
	Length of Test	Tabing Floor 20			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	
	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	L	OIL CONSERV	ATION COMMISSION	
	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.		1 / Harran		
	•			TITLE	
	Signature) AGENT		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.		
	JULY 3, 1973				
	(Da		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 multiply