

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
PRORATION OFFICE	

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-110
Effective 1-1-65

JUL 13 1976

O. C. C.
ARTESIA, OFFICE

Operator DAVID C. COLLIER	
Address P.O. BOX 798, ARTESIA, NM 88210	
Reason(s) for filing (Check proper box): New Well <input type="checkbox"/> Change in Transporter <input type="checkbox"/> Recompletion <input type="checkbox"/> Other <input type="checkbox"/> Change in Ownership <input checked="" type="checkbox"/> MILDRED CRANE HUDSON Box 476, ARTESIA, NM 88210	

Lease Name MALCO	Section 1	Range EMPIRE	Kind of Lease State, Federal or Free FEDERAL	Lease No. LC 065478(b)
Location Unit Letter A 330 Feet From Top North 330 Feet From The East Line of Section 3 Township 18S Range 27E, NMPM, Eddy County				

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> Navajo Crude Oil Purchasing Company Address (Give address to which approved copy of this form is to be sent) Drawer 175, Artesia NM 88210	
Name of Authorized Transporter of Gas <input type="checkbox"/> Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks. A 3 18S 27E	Is gas actually connected? No

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

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't	Diff. Res't
Date Spudded	Date Comp'l. Ready to Prod.	Total Depth				P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Tub. Casing Gas Pay				Tubing Depth			
Perforations						Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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	

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	

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.	
G.C. Wilson (Signature) Agent July 2, 1976 (Date)	

OIL CONSERVATION COMMISSION	
APPROVED <u>ONE AND ONE DEPARTMENT</u> , 19	
BY <u>Susan M. Morris</u>	
TITLE <u>JUL 14 1976</u>	
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. Separate Forms C-104 must be filed for each pool in multiply completed wells.	

