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

Form C-104
Superseded by C-104 and C-110
Effective 1-1-81
RECEIVED

OCT 23 1981
O. C. D.
ARTESIA, OFFICE

Madarko Production Company /
P. O. Box 67, Loco Hills, New Mexico 88255
In(s) for filing (Check proper box)
Well ☐ Change in Transporter of:
Completion ☐ Oil ☒ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Change to be effective 10-27-81
Former Transporter - Basin, Inc.

Change of ownership give name
Address of previous owner

DESCRIPTION OF WELL AND LEASE
Lease Name: Artesia State Unit Tr. 8 Well No.: 1 Pool Name, Including Formation: Artesia Q-G-SA Kind of Lease: XXXXXXXX Lease No.: B-11275
Location:
Unit Letter: D 990 Feet From The North Line and 990 Feet From The West
Line of Section: 13 Township: 18S Range: 27E, NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Navajo Refining Company, Pipeline Division P. O. Box 150 Artesia, New Mexico 88210
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
None Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit: P Sec.: 13 Twp.: 18S Rge.: 27E Is gas actually connected? No When:

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

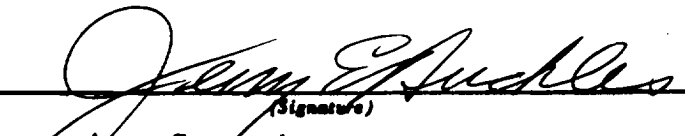
VI. COMPLETION DATA
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res't Diff. Res't
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations Depth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

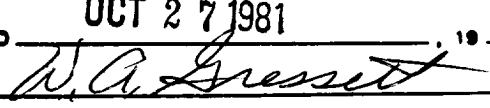
VII. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

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

Posted ID3
10-30-81
chj/bt/5 NRC

GAS WELL
Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MCF 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.

Area Supervisor
October 16, 1981
(Date)

OIL CONSERVATION COMMISSION
OCT 27 1981
APPROVED BY: 
TITLE: SUPERVISOR, DISTRICT H
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.