

RECEIVED	
DATE OF FILING	
SALE TAX	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION 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-11
Effective 1-1-65

RECEIVED BY
AUG 31 1983
O. C. D.
ARTESIA, OFFICE

Operator
MURPHY OPERATING CORPORATION

Address
P. O. Drawer 2648, Roswell Petroleum Building, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change of operator only, effective 9/1/83
Perforation ☐	
Change in Ownership ☐	
Change in Transporter of Oil ☐	
Change in Transporter of Gas ☐	
Change in Transporter of Condensate ☐	

Change of ownership give name and address of previous owner
Boyd Operating Company, P. O. Box 1756, Roswell, NM 88201

DESCRIPTION OF WELL AND LEASE	
Well No.	Pool Name, including Formation
State C	Artesia, Queen, Gbr. SA
Kind of Lease	Lease No.
State, Federal or Fee State	E-1287-3
Location	
Unit Letter G	1980 Feet From The N Line and 1980 Feet From The E
Line of Section 14	Township 18S Range 28E, NMPL, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing Co.	Box 175, Artesia, New Mexico 88210
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
None	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	A 14 18S 28E No

If this production is commingled with that from any other lease or pool, give commingling order number: CT B 89

COMPLETION DATA	
Designate Type of Completion - (X)	Oil Well Gas Well New Well Workover Deepen Plug Back Same as Prev. Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.
Elevations (DF, EAB, RT, CR, etc.)	Name of Producing Formation
Perforations	Top Oil/Gas Pay
	Tubing Depth
	Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL		(Test must be after recovery of total volume of lead 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 (Flow, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE	OIL CONSERVATION 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.	APPROVED AUG 31 1983
MURPHY OPERATING CORPORATION	Original Signed By
A. J. Murphy	Leslie A. Clements
President	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 existing oil wells, and only Sections I, II, III, and VI for existing gas wells.