		-	
NO. OF COPIES RECEIVED			
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS RECEIVED Operator JUL 27 1970 Stallworth Oil & Gas V Address West Missouri Avenue, Midland, Texas 79701
filing (Check proper box)
Other (Please explain) o.c.c Reason(s) for filing ARTESIA, OFFICE New Well Recompletion Oil Dry Gas Condensate Change in Ownershi-Casinghead Gas If change of ownership give name and address of previous owner \_\_\_ Ryder Scott Management Co., 922 8th Street, Wichita Falls, Texas 76301 II. DESCRIPTION OF WELL AND LEASE
| Well No. | Pool Name, Including Formation Kind of Lease Lease No. State, Federal or Fee Artesia Queen Gbr. S.A. State E-1313 Amerada State Location 660 Feet From The North Line and 2310 Feet From The West Unit Letter Line of Section 20 Township 18 Range 28 , NMPM, Eddy County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil 🗶 No. Freeman Ave., Artesia, N.M. 88210
Address (Give address to which approved copy of this form is to be sent) Navajo Refining Co., Pipe Line Div.

Name of Authorized Transporter of Casinghead Gas or Dry Gas When Sec. Rge. Is gas actually connected? Twp. If well produces oil or liquids, give location of tanks. C 20 18 ⊹ 28 No If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA New Well Plug Back Same Bes'v. Diff. Bes'v. Workover Deepen Designate Type of Completion - (X) Date Compl. Ready to Prod. Total Depth P.B.T.D. Date Spudded Top Oil/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD DEPTH SET SACKS CEMENT CASING & TUBING SIZE HOLE SIZE (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) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test

V. TEST DATA AND REQUEST FOR ALLOWABLE Casing Pressure Choke Size Tubing Pressure Length of Test

**GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Actual Prod. Test-MCF/D Length of Test Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Choke Size Testing Method (pitot, back pr.)

Water - Bbls.

## VI. CERTIFICATE OF COMPLIANCE

Actual Prod. During Test

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.

Oil - Bbls.

STALLWORTH OIL & GAS  Meleners
Murray E. Helmers (Signature)
Engineer (Title)
June 1, 1970

(Date)

OIL CONSERVATION COMMISSION

Ggs - MCF

APPROVED JUL TITLE OIL AND GAS INSTELLUR

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.