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DISTRIBUTION
SANITARY
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
OPERATOR
PRODUCTION OFFICE

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-55

APR 30 1976

I. Operator **DAVID C. COLLIER** **O. C. C.**
Address **ARTESIA, OFFICE**
P. O. BOX 798, ARTESIA NM 88210
Reason(s) for filing (Check one or more) Other (Please explain)
New Well ☐ Change in Ownership ☒ Recompletion ☐ Change in Ownership ☒

If change of ownership gives name and address of previous owner **L & G OIL COMPANY, BOX 213, ARTESIA, NM 88210**

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Kind of Lease	Lease No.
GULF STATE	2	ARTESIA GRAYBURG SA
Location	State, Federal or Free	STATE
Unit Letter 0	990	SOUTH
23	18S	28E
23	18S	28E
23	18S	28E

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter (Check one)	Name of Authorized Transporter (Check one)
NAVAJO REFINING CO. PIPELINE DIVISION	N. FREEMAN, ARTESIA, NM 88210
Name of Authorized Transporter (Check one)	Name of Authorized Transporter (Check one)
J 23 18S 20E NO	NO

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Workover	Deepen	Flow Back	Same Reservoir	Diff. Reservoir
Date Spudded	Date Completed	Date Deepened	Flow Back	Same Reservoir	Diff. Reservoir
Elevations (DF, RKB, RT, etc.)	Flow Back	Same Reservoir	Diff. Reservoir	Flow Back	Same Reservoir
Perforations	Flow Back	Same Reservoir	Diff. Reservoir	Flow Back	Same Reservoir
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		

V. 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 design or be for full 24 hours

Date First New Oil Run To Surface	Date of Test	Flowing Method (Flow, pump, gas lift, etc.)
Length of Test	Flowing Pressure	Flowing Pressure
Actual Prod. During Test	Flowing Pressure	Flowing Pressure

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Boils. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back prod)	Flowing Pressure (Shut-in)	Flowing Pressure (Shut-in)	Flowing Pressure (Shut-in)

VI. 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

J. G. Wilson
(Signature)

Agent

April 30, 1976

(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAY 3 1976**, 19

BY **W. A. Gressett**

TITLE **SUPERVISOR, DISTRICT II**

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.