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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

RECEIVED

JUL 18 1973

I. Operator **KERSEY & COMPANY** **J.C.C.**
Address **P. O. Box 316, Artesia, New Mexico 88210**
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☐ Change in Transporter of:
Recompletion ☒ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Convert from Injection to Producing

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Twin Lakes	Well No. 5	Pool Name, Including Formation Artesia	Kind of Lease State, Federal or Fee	State State	Lease No. B-647
Location Unit Letter K ; 2310 Feet From The South Line and 2310 Feet From The West Line of Section 28 Township 18 Range 28 , NMFM, Eddy County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company, Pipe line Div.	Address (Give address to which approved copy of this form is to be sent) North Freeman Ave, Artesia, N. Mex. 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> 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 L	Sec. 28
	Twp. 18	Rge. 28
	Is gas actually connected? No When	

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)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover <input checked="" type="checkbox"/>	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded Well worked over 1960, For. Inj. well	Date Compl. Ready to Prod. June 1, 1973	Total Depth 2050		P.B.T.D. 2050				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Grayburg	Top Oil/Gas Pay 2005		Tubing Depth 2000				
Perforations Open hole 2005 - 2015					Depth Casing Shoe 1945			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
10"	8 5/8		660		100			
8"	4 1/2 - 9 5/8		1945		500			

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 depth or be for full 24 hours)

Date First New Oil Run To Tanks June 14, 1973	Date of Test June 15, 1973	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hrs.	Tubing Pressure 15#	Casing Pressure 0	Choke Size 0
Actual Prod. During Test 20	Oil - Bbls. 5	Water - Bbls. 15	Gas - MCF

GAS WELL

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

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.

Harold Kersey
(Signature)
Owner
(Title)
July 17, 1973
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 18 1973, 19
BY W. A. Gressett
TITLE OIL AND GAS INSPECTOR

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.