

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
 Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, New Mexico July 24, 1962
 (Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Graridge Corporation Resler Yates State, Well No. 332, in NW 1/4 SE 1/4,
 (Company or Operator) (Lease)

S 29 T 18S R 28E NMPM, Artesia Pool
 Unit Letter

Eddy

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

2310 FSL, 2310 FEL

Tubing, Casing and Cementing Record

Size	Feet	Size
7	513	150
4 1/2	2023	125
2	1984	---

County Date Spudded 7-2-62 Date Drilling Completed 7-5-62
 Elevation 3560 Total Depth 2025 PBTD 2021

Top Oil/Gas Pay 1994 Name of Prod. Form. 1st Grayburg

PRODUCING INTERVAL -

Perforations 1995 - 2000

Open Hole None Depth Casing Shoe 2023 Depth Tubing 1984

OIL WELL TEST - Pumping

Natural Prod. Test: 85.4 bbls. oil, --- bbls water in 24 hrs, --- min. Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): --- bbls. oil, --- bbls water in --- hrs, --- min. Size

GAS WELL TEST -

Natural Prod. Test: --- MCF/Day; Hours flowed --- Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: --- MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): None

Casing Tubing Date first new Press. - Press. - oil run to tanks July 17, 1962

Oil Transporter Continental Pipe Line Company

Gas Transporter None

Remarks: On same unit with well N. 58

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved: JUL 24 1962, 19

Graridge Corporation
 (Company or Operator)

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title: OIL AND GAS INSPECTOR

By: J. P. Darnell
 J. P. Darnell
 Superintendent

Send Communications regarding well to:

Name: Graridge Corporation

Address: Drawer B, Artesia, N. M.

EXAMINATION	
NAME	DATE
ADDRESS	
CITY	
STATE	
U. S. C. S.	
TRANSPORTER	
FILE	
BUREAU OF MINES	

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

FORM C-110
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator Graridge Corporation				Lease Resler Yates State		Well No. 332	
Unit Letter J	Section 29	Township 18S	Range 28E	County Eddy			
Pool Artesia				Kind of Lease (State, Fed Fee) State #647			
If well produces oil or condensate give location of tanks			Unit Letter H	Section 21	Township 18S	Range 28E	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Continental Pipe Line Company				Address (give address to which approved copy of this form is to be sent) Artesia, New Mexico			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> None			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

Not commercial

REASON(S) FOR FILING (please check proper box)

New Well ☒ Change in Ownership ☐
 Change in Transporter (check one) Other (explain below)
 Oil ☐ Dry Gas ☐
 Casing head gas . ☐ Condensate.. ☐

RECEIVED
 JUL 2 1962
 O. C. S.
 ARTESIA, N. M.

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **24** day of **July**, 19**62**.

OIL CONSERVATION COMMISSION		By
Approved by 	Title J. P. Darnell Superintendent	
Title OIL AND GAS INSPECTOR	Company Graridge Corporation	
Date JUL 2 1962	Address Drawer B, Artesia, N. M.	