## DISTRIBUTION NEW MEXICO OIL CONSERVATION ( AISSION ANTA FE Form C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and C 1 Effective 1-1-65 AND S.G.5. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS AND OFFICE RECEIVED OIL TRANSPORTER SPERATOR AUG 26 1977 RORATION OFFICE Operator Paul Slayton a. c. c. ANTERIA, OFFICE Address P 0 Box 1936 Roswell, N Mex 88201 Peason(s) for filing (Check proper box) Other (Please explain) ew Well Change in Transporter of: Recompletion OIL Dry Gas Change in Ownership XX Casinghead Gas Condensate If change of ownership give name and address of previous owner H & S Oil Co. 216 Amer Home Bldg Artesia, N Mex 88210 II. DESCRIPTION OF WELL AND LEASE West Artesia Grayburg | Well No. | Pool Name, Including Formation Kind of Lease Unit Tract 12 15 Artesia Grayburg State, Federal or Fee 400 330 Unit Letter P South East Feet From The \_Line and Feet From The Line of Section 18 28 Eddy Township Range , NMPM, III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS NO. Freeman Ave, Artesia, N Mex Navajo Refining Co. Pipeline Div. Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) Unit Pge 28 Twp. If well produces oil or liquids, give location of tanks. Is gas actually connected? When 7 18 No If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Cil Well Gas Well New Well Workover Deepen Plug Bock Same Res'v. Diff. P. Designate Type of Completion -(X)Date Compl. Ready to Prod. Total Depth P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oll/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) OIL WELL Date First New Oil Run To Tanks Date of Test Froducing Method (Flow, pump, gas lift, etc.) pas Length of Test Tubing Pressure Cosing Pressure Chore/Size 1/ Actual Prod. During Test Oil-Bhis. Water . Ebis. 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.

Piles	L. Wickersham	
Clerk	(Signature)	
<u></u>		

(Date)

Aug. 24, 1977

(Title)

OIL CONSERVATION COMMISSION

Lease No.

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APPROV	ED	AUG	30	1977		19
m.,	11	0	2	100	sold	

TITLE SUPERVISOR, DISTRICT, IL

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despened 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, ell name or number, or transporter, or other such change of condition.

Forms Cally must be filled for such and la m