

DISTRIBUTION	
ANTA FE	
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S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

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-1
Effective 1-1-65

RECEIVED

AUG 26 1977

I. Operator Paul Slayton
Address P O Box 1936 Roswell NMex 88201
Reason(s) for filing (Check proper box)
New Well ☐ Change In Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change In Ownership ☒ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
If change of ownership give name and address of previous owner H & S Oil Co. 216 Amer. Home Bldg Artesia, NMex 88210

II. DESCRIPTION OF WELL AND LEASE
Well No. 12 Pool Name, including Formation Artesia-Grayburg Kind of Lease State Lease No. E 7179
Location
Unit Letter L 990 Feet From The West Line and 1650 Feet From The South
Line of Section 8 Township 18 Range 28, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☐
Navajo Refining Co. Pipeline Div Address (Give address to which approved copy of this form is to be sent)
No. Freeman Ave. Artesia, NMex 88201
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Injection Well 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 8 Sec. 18 Twp. 28 Range 28 Is gas actually connected? NO When

IV. COMPLETION DATA
Designate Type of Completion -- (X)
Oil Well ☐ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'ty. ☐ Diff. Res'ty. ☐
Date Spudded Date Compl. Ready to Prod. Total Depth F.B.T.D.
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/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 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 Date of Test Producing Method (Flow, pump, gas lift, etc.)
Length of Test Tubing Pressure Casing Pressure Choke Size
Actual Prod. During Test Oil-Bbls. Water-Bbls. 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.
Ray Wintersham
Clerk
Aug. 24, 1977

OIL CONSERVATION COMMISSION
AUG 30 1977
APPROVED W. A. Grasset, 19
BY SUPERVISOR, DISTRICT II
TITLE
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.
See also Form C-104, must be filed for each test on each well.