

REQUEST FOR ALLOWABLE
ANDForm C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

APR 11 1973

NEWMONT OIL COMPANY ✓

O. C. C.

ARTESIA, OFFICE

88210

P. O. BOX 1305, ARTESIA, NEW MEXICO

Reason(s) for filing (check proper box)

New Well ☐Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☒Dry Gas ☐Casinghead Gas ☐Condensate ☐

Other (Please explain)

Effective April 16, 1973 @ 7:00 A.M.

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name West Loco Hills Well No. 3 Pool Name, including Formation Loco Hills Grayburg Kind of Lease Fed. Lease No. LC-058480

Location

Unit Letter K ; 1650 Feet From The South Line and 1650 Feet From The WestLine of Section 3 Township 18S Range 29E , NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
Navajo Refining Company Pipeline Division North Freeman Avenue, Artesia, N.M. 88210Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ 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 E Sec. 10 Twp. 18S Rge. 29E Is gas actually connected? No When

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

COMPLETION DATA

Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.

Date Spudded Date Compl. Ready to Prod. Total Depth P.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

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. Total-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate

Testing Method (pilot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size

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.

OIL CONSERVATION COMMISSION

APR 13 1973

APPROVED _____, 19

BY W. A. GressettTITLE 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 calculation 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 transportation or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

District Superintendent

April 11, 1973