NEW MEXICO OIL CONSERVATION COMMISSION P. O. DRAWER DD ARTESIA, NEW MEXICO

Dec.	1968	

	•		
No	A	18	

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE	12/17/68				
PURPOSE:	ALLOWABLE REVISION (Waterflood)				
	Effective 12/1/68, the allowable of the following Newmont Oil Company well in the Loco Hills Pool is				
	hereby revised as indicated.				
	West Loco Hills G4S Unit Tr.28 \$3-K, 10-18-29, increased to 450 BOPD or 13950 bbls for the month.				
	wag/jw				
	Hewmone Gil Co. OIL CONSERVATION COMMISSION				
	TIM LOVE Description				
	SUPERVISOR, DISTRICT NO. 2				

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NEW MEXICO OIL CO'ISERVATION COMMISSION

Form C-104

SANTA FE	REQUEST I	FOR ALLOWABLE	Supersedes Old C-104 and C Effective 1-1-65	
U.S.G.S.	 AUTHORIZATION TO TRA	AND NSPORT OIL AND NATURAL	_ GAS	
LAND OFFICE	ACTIONIZATION TO THE	OK TOE ARD RATORAL	RECEIVED	
TRANSPORTER OIL /			_ .	
GAS /		Market 1	MAR 1 1 1956	
PRORATION OFFICE				
Newmont Oil Co	npany 🎼		O. C. C. Artebia, office	
ddress	ap 411.)		, e. 11da	
	t National Bank Building,			
Reason(s) for filing (Check proper b	oox) Change in Transporter of:	Other (Please explain)		
Recompletion	Oil XX Dry Gas	\subseteq Change Location	of Tank Battery	
Change in Ownership	Casinghead Gas Conden	sate Jum Cant	of Tank Battery L. Pipeline Co.	
change of ownership give name	;			
nd address of previous owner				
DESCRIPTION OF WELL AN	D LEASE	me, Including Formation	Kind of Lease	
_ease Na:ie W. Loco Hills G 4S U		Hills Grayburg	State, Federal or Fee State	
Location				
Unit Letter;	2310 Feet From The South Line	e and Feet Fr	om The	
Line of Section 10	Township 18-S Range	29-E , NMPM,	Eddy Cour	
DESIGNATION OF TRANSPO Name of Authorized Transporter of	ORTER OF OIL AND NATURAL GA	S Address (Give address to which ap	oproved copy of this form is to be sent)	
Texas-New Mexico Pip	e Line Company	P.O. Box 1510, Midla		
Name of Authorized Transporter of Valley Gas Corporati	Casinghead Gas A or Dry Gas	Address (Give address to which ap	oproved copy of this form is to be sent)	
<u> </u>	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
f well produces oil or liquids, give locat on of tanks.	E 10 18-S 29-E	Yes	3-8-66	
	with that from any other lease or pool,	give commingling order number:		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. R	
Designate Type of Comple		1	D. T. D.	
Date Spud led	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Pool	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth	
		<u> </u>	Depth Casing Shoe	
Perforations				
		CEMENTING RECORD	0.000 0000	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	A DOD AT LOWARIES	f	oil and must be sound to an averaged to	
FEST DATA AND REQUEST OIL WELL	FUR ALLOWABLE (Test must be a able for this de	epth or be for full 24 hours)	oil and must be equal to or exceed top	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, go	is lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	
		1	<u> </u>	
GAS WELL		Dille G. V. Arrige	Complete of Co. 2	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
CERTIFICATE OF COMPLI	ANCE	OIL CONSER	RVATION COMMISSION	
horoby cartify that the rules of	nd regulations of the Oil Conservation	APPROVED MAR 16	1966 , 19	
Commission have been complied	ed with and that the information given the best of my knowledge and belief.	By Wil A. Gra	essett	
above is true and complete to	the best of my knowledge and belief.	SAL MALE GOES HAS		
		TIILE		
ORIGINAL SIGNED BY H. J. LEDBETTER		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deep		
	Signature)	well, this form must be accountests taken on the well in a	impanied by a tabulation of the devi	
Division Superintend		All sections of this form	n must be filled out completely for a	
	(Title)	able on new and recomplete	d wells.	
March 8, 1966		Fill out Sections I, II,	III, and VI only for changes of o	

(Date)

Fill out Sections I, II, III, and VI only 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.