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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	1
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

APR 11 1973

Newmont Oil Company / O. C. C.	
ARTESIA OFFICE	
Address P. O. Box 1305, Artesia, New Mexico 88210	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of:
Recompletion ☐	Oil ☒
Change in Ownership ☐	Casinghead Gas ☐
	Dry Gas ☐
	Condensate ☐
Other (Please explain) Effective April 16, 1973 @ 7:00 A.M. <i>Change from previous authorization</i>	
Change of ownership: give name and address of previous owner	

DESCRIPTION OF WELL AND LEASE			
Lease Name <i>West Low Hills</i>	Well No. 4	Pool Name, including Formation Loco Hills Grayburg	Kind of Lease State, Federal or Fee Fed
L.H.G 4.S. Ut Tract 6			Lease No. LC-055374
Location			
Unit Letter P	660	Feet From The South	Line and 660 Feet From The East
Line of Section 12	Township 18S	Range 29E	, NMPM, Eddy County

SIGNATURE 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 Pipe Line Division	North Freeman Ave. Artesia, N.M. 88210		
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)		
Well produces oil or liquids, give location of tanks.	Unit M	Sec. 7	Twp. 18S Rge. 30E
			Is gas actually connected? No
			When

This production is commingled with that from any other lease or pool, give commingling order number:									
COMPLETION DATA									
Designate Type of Completion - (X)									
Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.						
Drillings (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth						
Drillings		Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT						

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 allowable for this depth or be for full 24 hours)			
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
Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

S WELL			
Prod. Test - 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 is true and complete to the best of my knowledge and belief.	
<i>Charles C. Joy</i> (Signature) District Superintendent (Title) April 11, 1973 (Date)	

OIL CONSERVATION COMMISSION	
APR 13 1973	
APPROVED	BY <i>W. P. Gressett</i>
TITLE 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 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.	
Separate Forms C-104 must be filed for each pool in multiply completed wells.	