

NEW MEXICO OIL CONSERVATION COMM
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
Supersedes OIL O-101 and O-11
Effective 1-1-65

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CARD OFFICE	
TRANSPORTER	OIL / GAS /
OPERATOR	/
PRODUCTION OFFICE	

RECEIVED

FEB 17 1978

Operator
Holly Energy, Inc.

Address
2001 Bryan Tower, Suite 2680, Dallas, Texas 75201

Reason(s) for filing (Check proper box)
 New Well Change in Transporter of: Oil Dry Gas
 Recompletion Coalbed Gas Condensate
 Change in Ownership Other (Please explain) Effective Feb. 1, 1978 from T.N.M.

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Pasteller B	Well No. 1	Pool Name, Including Formation Loco Hills Queen GBR SA	Kind of Lease State, Federal or Free Federal Free Federal	Lease No. LC063621A
Location Unit Letter A : 330 Feet From The North Line and 990 Feet From The East				
Line of Section 17 Township 18S Range 30E , N.M.P.M. Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing Company	Address (Give address to which approved copy of this form is to be sent) Box 175, Artesia, N.M. 88210
Name of Authorized Transporter of Coalbed Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or fluids, give location of tanks. Unit A Sec. 17 Twp. 18 Rge. 30	Is gas actually connected? 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	Some Res't.	Perf. In
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DE, 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 from 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-Base	Water-Base	Gas-MCF

Tested on 2/24/78 change to NCO

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Leak. Coefficient/MCF	Gravity of Condensate
Testing Method (Test, Back etc.)	Tubing Pressure (psig-in)	Casing Pressure (psig-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.

Robert H. Loyd
Robert Loyd
Supt. Production & Exploration
Feb. 8, 1978

OIL CONSERVATION COMMISSION
FEB 20 1978

APPROVED
BY *W.A. Gressett*
TITLE **SUPERVISOR, DISTRICT II**

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled oil well, the form must be accompanied by a tabulation of 60-day yield tests taken on the well in accordance with RULE 1104.
All entries of OIL Yields must be filled out only for all the entries of 60-day yield tests.
Fill out only Sections I, II, III, and VI for change of name, well name or number, or transporter, or other such change of conditions.