013	TRIBUTI	on 7		
SANTA FE		7		
PILE		17-	· · · · · ·	
U.S.G.S.		1		
LAND OFFICE		<u>+</u>		
TRANSPORTER	OIL		· · · · · · · · · · · · · · · · · · ·	
	GAS			
PRORATION OFFICE		17		
OPERATOR		11		

## "EW MEXICO OIL CONSERVA?" N COMMISSION (Form C-104) Santa Fe, New Mexico Revised 7/1/57

**REQUEST FOR (OIL) - (GAS) ALLOWAPLE** 

New Well Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gai must be reported on 15.025 psia at 60° Fahrenheit.

				Artosia, New Me (Place)	zico 10/20/63 (Date)
E ARE F	IEREBY R	EQUESTI	NG AN ALLOWABLE	FOR A WELL KNOWN AS:	
					in SE- 14 SW 14,
(Co N	mpany or Oj	perator) 20 ·	(L) - 18-5	E, NMPM., North Be	ann Orren-Gravhern
Unit La	, 500 Her		., 1.10-0, K.00	, NMPM.,	
Eddy			County. Date Spudd	d 8/28/63 Date Dr11	ling Completed 9/1/63
Pleas	e indicate	location:		. Total Depth 322	
D	СВ		Top Oil/Gas Pay 282	9 Name of Prod. Form	. Queen-Grayburg
2			PRODUCING INTERVAL -		3078, & 3140
		╇╌╦┥	Perforations 2829	2842, 2880, 2944, 2948	3025, 3028, 3078, Depth
E	F G	H	Open Hole		70 Tubing 2800
			OIL WELL TEST -		
L	K J	I	Natural Prod. Test:	one bbls.oil, bbls wa	Choke ter inhrs,min. Size
				cture Treatment (after recovery of	
M	Nx 0	P			Choke in 24 hrs, min. Size Darman
			GAS WELL TEST -		
9905.	- 23/0	W			Challes Class
	FOOTAGE)	enting Reco			wedChoke Size
Sire	Feet	Sax		ot, back pressure, etc.): cture Treatment:	
	1			thod of Testing:	MCr/Day; HOURS HOWED
9 5/8"	30'	yda br	1/k		
	5511		Acid or Fracture Treat	ment (Give amounts of materials us	ed, such as acid, water, oil, and
//1	351	140 ax	Casing Tubin	Defined cil. 90004	
4 1/2"	3170	131 83		None_oil run to tanks	/10/83
21	2800		Oil Transporter	CWand Corporation	RECEIVED
<i>.</i>	2800	1	Gas Transporter N	one	RECEIVED
emarks:		••••			NCT 2 3 1963
•••••		•••••	••••••		
			•••••		
I hereb	by certify t	hat the info	ormation given above is	true and complete to the best of m	ny knowledge.
pproved	001	28196	<u>3</u> , 19		ay or Operator)
				Pin Fral	lert
Ol	IL CONSE		COMMISSION	By the contract of the contrac	lignature
. M	1.1 Am	istron	ĊØ	TitleAssistant Gene	rarl.Manager
• • • • • • • • • • • • • • • • • • •	AND GAS 1	ABPECTON	· · · · · · · · · · · · · · · · · · ·	Send Communica	tions regarding well to:
itle		7	•••••••••••••••••••••••••••••••••••••••	Name Louis E. Ho	ld <del>er, Jr.</del>
				Address P. O. Box	1518. Midland. Texas

October 24, 1963

New Mexico Oil Conservation Commission P. O. Drawer DD Artesia, New Mexico

> Re: USA Light, Well No. 2, 29-18-30 Eddy County, New Mexico

Gentlemen:

Deviation surveys were taken during the drilling of our USA Light No. 2, which is located in Sec. 29, T. 183, 30E, Eddy County, New Mexico. The results of these surveys are as follows:

Date	Depth	Inclination	
8/29/63	1150	1 1/2•	
8/29/63	1490	1 1/2 •	
8/29/83	2019	1•	
8/30/63	2510	1 1/4°	
8/31/53	3102	1.	

Sincerely

FLOYD W. SMITH & CO., INC.

Hig Louis E. Holder, Jr.

Assistant General Manager

Subscribed and sworn before me this \_24th day of October 1983. (Sign) Notary in and for Midland County, Texas. -

LEH/P

Tenneco Oil Company, Midland, Texas 001

RECEIVED

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OCT 2 8 1963

0. C. C. ARTEBIA. OFFICE

NUMBER OF COPIES RECEIVED			FORM C-110 (Rev. 7-60)			
U.S.G.S.						
LAND OFFICE  OIL    TRANSPORTER  OIL    GAS  GAS    PRORATION OFFICE	TO TRANSPORT OIL AND NATURAL GAS					
OPERATOR 2	FILE THE ORIGINAL AND 4 C	OPIES WITH THE APPROPRIATE OFFICI	I			
Company or Operator Floyd W. Smit		Lease USA Holt	Well No.			
Unit Letter Section T	ownship Range	OE County Eddy				
N2918530 EEadyPool North Benson Queen-GrayburgKind of Lease (State, Fed, Fee)If well produces oil or condensateUnit LetterSectionTownshipRange						
If well produces oil or condens give location of tanks	sate Unit Letter	Section Township 29 18-5	Range 30 E			
Authorized transporter of oil X or cond	ensate	Address (give address to which approved copy	of this form is to be sent)			
ME wood lor		Abilene Texa.	5			
	Is Gas Actually Connected	d? YesNo				
Authorized transporter of casing head gas	ot dry gas Date Con- nected	Address (give address to which approved copy	of this form is to be sent)			
None						
If gas is not being sold, give reasons and						
Vented No	Pipe line a	vailable.				
Venieu no						
	REASON(S) FOR FILING	(please check proper box)				
New Well		Change in Ownership				
	sporter (check one)	Other (explain below)				
	Dry Gas gas . Condensate					
		R	ECEIVED			
			<u>OCT 2 3 1963</u>			
Remarks						
			O. C. C.			
			ARIESIA, UPPIUM			
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.						
Executed this the 21 day of Oct, 1963.						
OIL CONSERVATIO		teris Eddler	2			
ML armest	tronio	Title asst ben mg	F •			
Title Del AMM GAS INSPECT	#A.	Company Floyd W. Smith Address Box 1518 Midland	halo Inc			
Date OCT 2 8 1963		Address				