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

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

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AUG 26 1965

Operator Newmont Oil Company		O. C. C.	
Address Room 303, First National Bank Building, Artesia, New Mexico		ARTESIA, OFFICE	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:		
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name W.L.H.U. Tract 11B	Well No. 8	Pool Name, Including Formation Loco Hills - Grayburg	Kind of Lease State, Federal or Fee Federal
Location			
Unit Letter L	1980 Feet From The South Line and 660 Feet From The West		
Line of Section 11	Township 18-S	Range 29-E	NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Continental Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) Artesia, New Mexico		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Valley Gas Corporation	Address (Give address to which approved copy of this form is to be sent) Artesia, New Mexico		
well produces oil or liquids, give location of tanks.	Unit N	Sec. 2	Twp. 18S Rge. 29E
Is gas actually connected? Yes		When	

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
Date Spud led 3-7-64	Date Compl. Ready to Prod. 3-13-64		Total Depth 2685		P.B.T.D.			
Pool Loco Hills	Name of Producing Formation Grayburg		Top Oil/Gas Pay 2655		Tubing Depth 2661			
Perforations Open Hole 2646 - 2685					Depth Casing Shoe 2646			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/2"	8 5/8"		493		50			
7 7/8"	4 1/2"		2646		100			
	2 3/8"		2661					

V. 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 8-4-65	Date of Test 8-4-65	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 1	Oil-Bbls. 1	Water-Bbls. -0-	Gas-MCF

GAS WELL

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

VI. 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.

ORIGINAL SIGNED BY
H. J. LEDBETTER

(Signature)
Division Superintendent

(Title)
August 26, 1965

(Date)

OIL CONSERVATION COMMISSION

APPROVED **AUG 26 1965**, 19

BY **ML Armstrong**

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 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.