ĺ	NO. OF COPIES RECEIVED					
	Q STRIBUTION		CONSERVATION COMMISSION	Form C+104		
	SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65		
	FILE /	AUTHODIZATION TO TO	AND ANSPORT OIL AND NATURAL G	· A C - <b>-</b>		
	LAND OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL G	RE-		
	IRANSPORTER OIL /			"GE!		
	GAS			SEP 2 9 1966		
	OPERATOR 3	,		SEP 20		
1.	PRORATION OFFICE  Operator			ARTESIA, OFFICE		
	Newmont Oil Co.	,		RIESIC.		
	Address			OFFIC		
		National Bank, Artesia				
	Reason(s) for filing (Check proper box	Change in Transporter of:	Other (Please explain)			
	New Well Recompletion	Oil Dry G	as New Well Complet	:ion		
	Change in Ownership	Casinghead Gas Conde	<del>-</del>			
	If change of ownership give name and address of previous owner					
II.	DESCRIPTION OF WELL AND	Well No. Pool No.	ame, Including Formation	Kind of Lease		
	W. Leso Hills G 48 UT	Tract 10B 7	Loco Hills	State, Federal or Fee <b>Federal</b>		
	Location			_		
	Unit Letter;;	1980 Feet From The North Li	ne and Feet From	The <b>Kast</b>		
	2	108	29E , NMPM, Edd	County		
	Line of Section , To	wnship 188 Range	, Inview,			
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS			
	Name of Authorized Transporter of Oi	or Condensate	Address (Give address to which appro	ved copy of this form is to be sent)		
	Continental Pipe Liz		Artesia, N. M. Address (Give address to which appro	ned conv of this form is to be sent!		
	Name of Authorized Transporter of Co	singhead Gas or Dry Gas	Address (Give address to which appro	vea copy by this form is to be seme		
		Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en		
	If well produces oil or liquids, give location of tanks.	N 2 18 29	No			
	If this production is commingled w	If this production is commingled with that from any other lease or pool, give commingling order number:				
	COMPLETION DATA			Plug Back   Same Res'v. Diff. Res'v.		
	Designate Type of Completi	on - (X) Oil Well Gas Well	New Well Workover Deepen	Flug Back   Banke Hess VI		
	Date Spudied	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	8-31-66	9-16-66	2671			
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Loco Hills	Grayburg	2671	2635		
	Perforations		06.00	Depth Casing Shoe 2671		
	1 per ft. at 2629,20	530,2631,2632,2637,2638,	AD CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	10 3/4"	8 5/8 <sup>w</sup>	420'	50		
	7 7/8 <sup>th</sup>	4 1/2**	2671*	100		
V.	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)					
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)		
	9-17-66	9-18-66	Pumping			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	24	Oil-Bbls.	Water-Bbls.	Gas-MCF		
	Actual Prod. During Test	3	7			
	10			:		
	GAS WELL					
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
			Casing Pressure	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure	Cusing Pressure	Choke 5120		
	CORPUSION OF COMPLIAN	NGE	OH CONSERV	ATION COMMISSION		
VI	. CERTIFICATE OF COMPLIANCE		@178 A 0 1400A			
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED SEP 2 9 1966 , 19			
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY W. a. Gressett			
				OIL AND GAS INSPECTOR		
			TITLE			
				This form is to be filed in compliance with RULE 1104.		
	/0.		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			
	(Signature)  GRIBINAL SIGNED BY		tests taken on the well in accordance with RULE 111.			
	H. J. LEDBETTER (Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.			
	(1.000)		Fill out Sections I II. III. and VI only for changes of owner,			
	Division Superintendent		well name or number, or transpo	well name or number, or transporter, or other such change of condition.  Separate Forms C-104 must be filed for each pool in multiply		
	Sept. 28. 1966		Separate Forms C-104 mu completed wells.	ist be filed for each pool in multiply		
	CORCE WAS TAKE					

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## WEK

## DRILLING CO., INC. - OIL WELL DRILLING CONTRACTORS

P. O. Box 1498 ROSWELL, NEW MEXICO TELEPHONES: ARTESIA 748-2981 ROSWELL 622-4992

September 20, 1966

Newmont Oil Company 303 First National Bank Building Artesia, New Mexico 88210

Re: West Loco Hills Unit Tract 10B - 7, Deviation

Survey

Listed below are the results of the deviation surveys ran while drilling the above well.

430'	1/20
9 <b>3</b> 0*	3/40
1457'	1 1/49
1957'	10
2367'	1 3/4
2672'	1 1/2

Subscribed and sworn before me this 20th day of September 1966, Kenneth D. Reynolds.

My commission expires: October 6, 1966

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