

4
DISTRIBUTION
SANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
PRODUCTION OFFICE
Operator

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
Address
P. O. Box 1305, Artesia, New Mexico 88210
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Completion ☐ Oil ☒ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Effective April 16, 1973 @ 7:00 A.M.
Change of ownership give name
Address of previous owner

DESCRIPTION OF WELL AND LEASE
Well Name West Loco Hills
H.G. 4.S. Ut Tract 13 Well No. 10 Pool Name, including Formation Loco Hills Grayburg
Kind of Lease State, Federal or Fee Fed. Lease No. LC-060904
Unit Letter L 1800 Feet From The South Line and 990 Feet From The West
Line of Section 12 Township 18S Range 29E, NMPM, Eddy County

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS
Signature of Authorized Transporter of Oil ☒ or Condensate ☐
Vajo Refining Company Pipeline Division
Signature of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Address (Give address to which approved copy of this form is to be sent)
North Freeman Ave. Artesia, N.M. 88210
Address (Give address to which approved copy of this form is to be sent)
Well produces oil or liquids, location of tanks. Unit M Sec. 7 Twp. 18S Rge. 30E
Is gas actually connected? No When
Is production 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 Same Res'v. Diff. Res'v.
Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.
Conditions (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Corrections Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

DATA AND REQUEST FOR ALLOWABLE 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)
First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)
Date of Test Tubing Pressure Casing Pressure Choke Size
Prod. During Test Oil-Bbls. Water-Bbls. Gas-MCF

WELL
Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate
Method (pilot, back pr.) Tubing Pressure (Chart-1a) Casing Pressure (Chart-1a) Choke Size

STATEMENT OF COMPLIANCE
I 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.
Charles C. Joy
District Superintendent
April 11, 1973
(Signature)
(Title)
(Date)

OIL CONSERVATION COMMISSION
APPROVED APR 13 1973
BY W. A. Grissett
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.