

DISTRIBUTION	
LAND AREA	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

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

Form C-104
Superseding Old C-101 and C-110
Effective 1-1-65

RECEIVED

DEC 15 1978

C. E. LaRue and B.N. Muncy, Jr. ✓		O. G. C.	
Address		ARTESIA. OFFICE	
P.O. Box 196, Artesia, New Mexico 88210			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input type="checkbox"/>	Gas has increased and has been connected by purchaser	
Recompletion	<input type="checkbox"/>		
Change in Ownership	<input type="checkbox"/>		
Change in Transporter of:			
Oil	<input type="checkbox"/>		
Dry Gas	<input type="checkbox"/>		
Casinghead Gas	<input checked="" type="checkbox"/>		
Condensate	<input type="checkbox"/>		

Change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Duval	1	North Benson Queen-Grayburg	State, Federal or Fee Federal	NM28527
Location				
Unit Letter	J	1980 Feet From The South	Line and 1980	Feet From The East
Line of Section	27	Township	18S	Range 30E
NMPM, 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"/>	Address (Give address to which approved copy of this form is to be sent)	
NAVAJO CRUDE OIL PURCHASING CO.	N. FREEMAN AVE. ARTESIA, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Co.	Bartlesville, Oklahoma 74004	
If well produces oil or liquids, give location of tanks.	Unit	Soc.
	J	27
		18S
		30E
Is gas actually connected?	When	
Yes	12/12/78	

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	Same Res.	Diff. Res.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, 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)

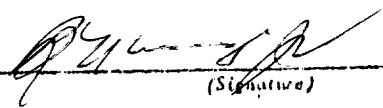
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-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.


(Signature)
Operator
December 15, 1978 (Date)
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 18 1978
BY W. A. Gressitt
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 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.