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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

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 1-1-85

NOV 17 1980

C. D.
OFFICE

Operator Ray Westall ✓	
Address P. O. Box 4 Loco Hills, New Mexico 88255	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Revised to show additional perforations
Recompletion <input checked="" type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Denton Federal	Well No. 1	Pool Name, including Formation Turkey Track	Kind of Lease State, Federal or Fee Fed. LC 067132
Location Unit Letter C : 660 Feet From The N Line and 2080 Feet From The W Line of Section 27 Township 18S Range 29E, NMPM,			

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Co., Pipeline Div.	Address (Give address to which approved copy of this form is to be sent) P.O. Drawer 175 Artesia, N.M. 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum	Address (Give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. C 27 18S 29E	Is gas actually connected? When No As soon as pipeline is 1

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input checked="" type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res. <input type="checkbox"/>
Date Spudded 7-24-80	Date Compl. Ready to Prod.		Total Depth 3015		P.B.T.D. 2624		
Elevations (DF, RKB, RT, CR, etc.) 3459	Name of Producing Formation 7 Rivers, Queen, Penrose		Top Oil/Gas Pay 1590		Tubing Depth 2600		
Perforations 1590, 92, 94, 96, 1664, 66, 68, 80, 82, 84, 86, Rivers 88, 90, 92, 94, 96, 98, 1700, 02, 04, 06, 08, 10, 12/86, 88, 90, 92, 94, 96, 98, 2100	Queen 2070, 72, 74, 76,		Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8 5/8 24# K55		DEPTH SET 334'		SACKS CEMENT 250sx		
7 7/8"	4 1/2 10 1/2#		3012		600sx		
	2 3/8 J55		2850				

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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 11-12-80	Date of Test 11-13-80	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure 0	Casing Pressure 0	Choke Size
Actual Prod. During Test 100	Oil - Bbls. 80	Water - Bbls. 20	Gas - MCF 40

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.

Ray Westall
(Signature)
Operator
(Title)
11-17-80
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 26 1980
BY W. G. Gressett
TITLE SUPERVISOR, DISTRICT 3

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.