

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-11
Effective 1-1-83

RECEIVED

OCT 30 '89

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	☒
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL ☐ GAS ☐
OPERATOR	
PROMOTION OFFICE	

Southwest Royalties, Inc.

Address

P. O. Box 11390, Midland, Tx 79702

Reason(s) for filing (Check proper box)

New Well ☐

Recompletion ☐

Change in Ownership ☒

Change in Transporter of:

Oil ☐

Casinghead Gas ☐

Dry Gas ☐

Condensate ☐

Other (Please explain)

Change of Operator

Effective Oct. 1, 1989

If change of ownership give name
and address of previous owner

STEVE SETI
Morexco, Inc., P. O. Box 481, Artesia, NM 88210

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Cal-Mon	3	Loco Hills, Q, GR, SA	State, Federal, or Fee	LG 4524
Location	Unit Letter	M	990	Feet From The
		South	Line and	990
			Feet From the	West
Line of Section	16	Township	18S	Range
			29E	NMPM, Eddy
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
Phillips 66 Company	9C1 Adamx Bldg, Bartlesville, OK					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
Phillips 66 Nat. Gas Co.	1040 Plaza Office Bldg, Bartlesville, OK					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rec'y.	Dist. Rec'y.
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					

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	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/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	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.

At Lee

(Signature)

Agent

(Title)

10-26-89

(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 24 1989

BY ORIGINAL SIGNED BY

MIKE WILLIAMS

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.