| NO. OF COPIES RECEIVED 5 | <u> </u> | | | |
|--|--|---|--|--|
| DISTRIBUTION SANTA FE | NEW MEXICO OIL | Form C-104 Supersedes Old C-104 and C | | |
| FILE | ; | REQUEST FOR ALLOWABLE AND | | |
| U.S.G.S. | AUTHORIZATION TO TH | RANSPORT OIL AND NATUR | AL GAS | |
| TRANSPORTER GAS | | ρ | RECEIVED | |
| OPERATOR PRORATION OFFICE Operator | | · | SEP 2 1965 | |
| 3arber 0il Inc | | | o. c. c. | |
| Address 901 West Pier | ce Carlsbad, New Mex | ico | ARTESIA, OFFICE | |
| Reason(s) for filing (Check proper b | , | Other (Please explain, | , | |
| New Well Recompletion Change in Ownership | Change in Transporter of: Cil Dry (Casinghead Gas Cond | Gas Change in Ope Neil H. Wills Hensate Hum Hu | rating Ownership from to Barber Oil Inc. lott T-20 to June | |
| If change of ownership give name and address of previous owner | Neil d. Vills raw | | Fult | |
| DESCRIPTION OF WELL AND | | • | | |
| Lease Mame | | Name, Including Formation | Kind of LeaseLC=050797 | |
| Turner-Federal | -20 iuss | ell Fool-Yates Sand | State, Federal or Fee Federal | |
| Unit Letter <u>K</u> ; <u>165</u> | O Feet From The South <u>-</u> | ine and 2339 Feet F | rom The West | |
| Line of Section 13 , T | Township 205 Range | | County | |
| | | | | |
| Name of Authorized Transporter of C Barber Cil Inc. | | Address (Give address to which a | approved copy of this form is to be sent) | |
| Barber Gil Inc. Name of Authorized Transporter of C | or Condensate | Address (Give address to which a Address (Give address to which a Is gas actually connected? | approved copy of this form is to be sent) approved copy of this form is to be sent) When | |
| Barber Cil Inc. Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks. | cr Condensate Casinghead Gas or Dry Gas Casinghead Gas Twp. Rge. | Address (Give address to which a Address (Give address to which a Is gas actually connected? | approved copy of this form is to be sent) When | |
| Barber Gil Inc. Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks. If this production is commingled w | cr Condensate Casinghead Gas or Dry Gas Casinghead Gas Twp. Rge. 13 20S 28E | Address (Give address to which a Address (Give address to which a Is gas actually connected? None 1, give commingling order numbers | approved copy of this form is to be sent) | |
| Barber Sil Inc. Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks. If this production is commingled w | or Condensate Casinghead Gas or Dry Gas Casinghead Gas Twp. Rge. 13 208 28 2 28 2 26 2 26 2 26 2 26 2 26 2 | Address (Give address to which a Address (Give address to which a Is gas actually connected? | approved copy of this form is to be sent) | |
| Barber Gil Inc. Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA | or Condensate Casinghead Gas or Dry Gas Casinghead Gas Twp. Rge. 13 208 28 2 28 2 26 2 26 2 26 2 26 2 26 2 | Address (Give address to which a Address (Give address to which a Is gas actually connected? None 1, give commingling order numbers | approved copy of this form is to be sent) | |
| Barber Sil Inc. Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Complet | cr Condensate Casinghead Gas or Dry Gas Casinghead Gas or Dry Gas Casinghead Gas Twp. Rge. 13 20S 28E with that from any other lease or pool | Address (Give address to which a Address (Give address to which a Is gas actually connected? None New Well Workover Deepe | when Fing Back Same Restv. Diff. Rester | |
| Barber Sil Inc. Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Complet Date Spudded | or Condensate Casinghead Gas or Dry Gas Unit. Sec. Twp. Rge. 13 20S 28E with that from any other lease or pool Cil Well Gas Well Date Compl. Ready to Prod. | Address (Give address to which a Address (Give address to which a Is gas actually connected? None New Well Workover Deepe Total Depth | When Plug Back Same Restv. Diff. Rest | |
| Barber Sil Inc. Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks. If this production is commingled well to the COMPLETION DATA Designate Type of Complet Date Spudded | cr Condensate Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. 13 20S 28: with that from any other lease or pool cion — (X) Date Compl. Ready to Prod. Name of Producing Formation | Address (Give address to which of Address (Give address to which of Is gas actually connected? None I, give commingling order number: New Well Workover Deepe Total Depth Top Oil/Gas Pay | When Plug Back Same Res'v. Diff. Res P.B.T.D. | |
| Barber Sil Inc. Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks. If this production is commingled well to the COMPLETION DATA Designate Type of Complet Date Spudded Fool | cr Condensate Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. 13 20S 28: with that from any other lease or pool cion — (X) Date Compl. Ready to Prod. Name of Producing Formation | Address (Give address to which as Address (Give address to which as Is gas actually connected? None Is gas actually connected? None New Well Workover Deeper Total Depth Top Oil/Gas Pay | when Plug Back Same Restv. Diff. Rest P.B.T.D. Tubing Depth Depth Casing Shoe | |
| Barber Sil Inc. Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks. If this production is commingled well to the COMPLETION DATA Designate Type of Complet Date Spudded Pool Perforations | cr Condensate Casinghead Gas or Dry Gas Casinghead Gas or Dry Gas Casinghead Gas or Dry Gas Casinghead Gas Casi | Address (Give address to which of Address (Give address to which of Is gas actually connected? None I, give commingling order number: New Well Workover Deepe Total Depth Top Oil/Gas Pay | When Plug Back Same Res'v. Diff. Res P.B.T.D. | |
| Rarber Sil Inc. Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Complet Date Spudded Pool Perforations | cr Condensate Casinghead Gas or Dry Gas Casinghead Gas or Dry Gas Casinghead Gas or Dry Gas Casinghead Gas Casi | Address (Give address to which as Address (Give address to which as Is gas actually connected? None Is gas actually connected? None New Well Workover Deeper Total Depth Top Oil/Gas Pay | when Plug Back Same Res'v. Diff. Res' P.B.T.D. Tubing Depth Depth Casing Shoe | |
| Barber Sil Inc. Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks. If this production is commingled well to the COMPLETION DATA Designate Type of Complet Date Spudded Pool Perforations | cr Condensate Casinghead Gas or Dry Gas Casinghead Gas or Dry Gas Casinghead Gas or Dry Gas Casinghead Gas Casi | Address (Give address to which as Address (Give address to which as Is gas actually connected? None Is gas actually connected? None New Well Workover Deeper Total Depth Top Oil/Gas Pay | when Plug Back Same Restv. Diff. Rest P.B.T.D. Tubing Depth Depth Casing Shoe | |
| Barber Sil Inc. Name of Authorized Transporter of Completed Proof Perforations Barber Sil Inc. Name of Authorized Transporter of Completed Spudded Pool HOLE SIZE TEST DATA AND REQUEST 1 | cr Condensate Casinghead Gas or Dry Gas Casinghead Gas Casinghe | Address (Give address to which and Address (Give address to which and Is gas actually connected? None Is gas actually connected? None New Well Workover Deepe Total Depth Top Oil/Gas Pay ND CEMENTING RECORD DEPTH SET after recovery of total volume of load | when Plug Back Same Restv. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT | |
| Barber Sil Inc. Name of Authorized Transporter of Computer of Computer Special Street Special S | cr Condensate Casinghead Gas or Dry Gas Casinghead Gas Casinghe | Address (Give address to which and Address (Give address to which and Is gas actually connected? None Is gas actually connected? None New Well Workover Deepe Total Depth Top Oil/Gas Pay ND CEMENTING RECORD DEPTH SET | when Plug Back Same Restv. Diff. Restlement P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT | |
| Barber Sil Inc. Name of Authorized Transporter of Completed Processing Proce | cr Condensate Casinghead Gas or Dry Gas Casinghead Gas Casing Casinghead Gas C | Address (Give address to which and Address (Give address to which and Is gas actually connected? None Is gas actually connected? None New Well Workover Deepe Total Depth Top Oil/Gas Pay ND CEMENTING RECORD DEPTH SET after recovery of total volume of load depth or be for full 24 hours) | when Plug Back Same Restv. Diff. Restlement P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT | |
| Barber Sil Inc. Name of Authorized Transporter of Completed Proof Designate Type of Completed Spudded HOLE SIZE TEST DATA AND REQUEST IOIL WELL. | cr Condensate Casinghead Gas or Dry Gas Casinghead Gas Casing Casinghead Gas C | Address (Give address to which and Address (Give address to which and Is gas actually connected? None Is gas actually connected? None New Well Workover Deepe Total Depth Top Oil/Gas Pay ND CEMENTING RECORD DEPTH SET after recovery of total volume of load depth or be for full 24 hours) | when Plug Back Same Restv. Diff. Restlement P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT | |
| Barber Sil Inc. Name of Authorized Transporter of Common of Authorized Transporter of Common of Authorized Transporter of Common of Education of tanks. If this production is commingled we COMPLETION DATA Designate Type of Complet Date Spudded Fool HOLE SIZE TEST DATA AND REQUEST IN OIL WELL. Date First New Oil Run To Tanks | cr Condensate Casinghead Gas or Dry Gas Unit. Sec. Twp. Rge. 13 20S 28E with that from any other lease or pool cion — (X) Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this a | Address (Give address to which as Address (Give address to which as Is gas actually connected? None Is gas actually connected? None In give commingling order numbers New Well Workover Deepe Total Depth Top Oil/Gas Pay ND CEMENTING RECORD DEPTH SET after recovery of total volume of load depth or be for full 24 hours) Producing Method (Flow, pump, gas) | when Plug Back Same Res'v. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT Sack Same Res'v. Diff. Res P.B.T.D. Depth Casing Shoe | |
| Barber Sil Inc. Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks. If this production is commingled well to the Complet Type of Complet Date Spudded Frool HOLE SIZE TEST DATA AND REQUEST IOLL WELL Date First New Oil Run To Tanks Length of Test | cr Condensate Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. 13 20S 28: With that from any other lease or pool cion — (X) Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this a Date of Test) Tubing Pressure | Address (Give address to which of Address (Give address to which of Is gas actually connected? None I, give commingling order number: New Well Workover Deepe Total Depth Top Oil/Gas Pay NO CEMENTING RECORD DEPTH SET after recovery of total volume of load depth or be for full 24 hours) Producing Method (Flow, pump, get Casing Pressure) | Tubing Depth Depth Casing Shoe SACKS CEMENT Choke Size Choke Size Choke Size Communication Commun | |
| Barber Cil Inc. Name of Authorized Transporter of Cil Inc. If well produces oil or liquids, give location of tanks. If this production is commingled well Completed Type of Completed Date Spudded Frool HOLE SIZE TEST DATA AND REQUEST IOIL WELL. Date First New Oil Run To Tanks Length of Test Actual Prod. During Test | cr Condensate Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. 13 20S 28: With that from any other lease or pool cion — (X) Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this a Date of Test) Tubing Pressure | Address (Give address to which of Address (Give address to which of Is gas actually connected? None I, give commingling order number: New Well Workover Deepe Total Depth Top Oil/Gas Pay NO CEMENTING RECORD DEPTH SET after recovery of total volume of load depth or be for full 24 hours) Producing Method (Flow, pump, get Casing Pressure) | Tubing Depth Depth Casing Shoe SACKS CEMENT Choke Size Choke Size Choke Size Communication Commun | |
| Barber Cil Inc. Name of Authorized Transporter of Cil Inc. If well produces oil or liquids, give location of tanks. If this production is commingled we COMPLETION DATA Designate Type of Complet Date Spudded Hool Hool Hole Size Test DATA AND REQUEST FOIL WELL. Date First New Oil Run To Tanks Length of Test | cr Condensate Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. 13 20S 28: With that from any other lease or pool cion — (X) Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this a Date of Test) Tubing Pressure | Address (Give address to which of Address (Give address to which of Is gas actually connected? None I, give commingling order number: New Well Workover Deepe Total Depth Top Oil/Gas Pay NO CEMENTING RECORD DEPTH SET after recovery of total volume of load depth or be for full 24 hours) Producing Method (Flow, pump, get Casing Pressure) | Tubing Depth Depth Casing Shoe SACKS CEMENT Choke Size Choke Size Choke Size Communication Commun | |
| Barber Cil Inc. Name of Authorized Transporter of Cil Inc. If well produces oil or liquids, give location of tanks. If this production is commingled well Complet Tool Data Designate Type of Complet Date Spudded Fool Ferforations HOLE SIZE TEST DATA AND REQUEST IOIL, WELL. Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL | Casinghead Gas or Dry Gas Unit. Sec. Twp. Rge. 13 20S 28E with that from any other lease or pool Coil Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this a Date of Test Tubing Pressure Oil-Bbls. | Address (Give address to which and Address (Give address to which and Is gas actually connected? None Is gas actually connected? None In give commingling order numbers New Well Workover Deepe Total Depth Top Oil/Gas Pay ND CEMENTING RECORD DEPTH SET after recovery of total volume of load depth or be for full 24 hours) Producing Method (Flow, pump, gas and pressure) Water-Bbls. | When Plug Back Same Res'v. Diff. Res' P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT I oil and must be equal to or exceed top allows lift, etc.) Choke Size Gas-MCF | |

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.

| > | . / 2 | |
|-----------|-------------|--|
| 1211 | 1 1 | |
| SHA 2 | JUN | |
|) ' (| (Signature) | |
| President | | |
| | (Title) | |
| 8-26-65 | | |

(Date)

OIL CONSERVATION COMMISSION

| PPROVED | SEP 3 | 1965 | |
|---------|---------------|--------|--|
| 34 ML | armu | rocce | |
| . , | THE HAVE MEDI | \neg | |

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 Sections I, II, III, and VI only 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.