T C

ANTA FE ILES.G.S.	REQUEST	FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	rorm C-104 Supersedes Old C-104 and C Elfective 1-1-65 GAS
TRANSFORTER OIL GAS OPERATOR PRORATION OFFICE			ECEIVED -
Slayton Oil	Corp.	.0//	PR 02 1984
P. O. Box 20	35 Roswell, New Mexico		ON. DIV
Reason(s) for filing (Check proper both the Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Ga Casinghead Gas Conder	7	151. 3 -1V.
f change of ownership give name and address of previous owner	Paul Slayton P. O.	Box 1936 Roswell, N	ew Mexico 88201
DESCRIPTION OF WELL AND Lease Name Bullseye Location Unit Letter D 330	Vell No. Pool Name, Including F 7 Marcelina Description The North Line	/Dakota State, Federa	alor Fee Fee
		9 W , NMPM, MCK	
DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	AS Address (Give address to which appro	9,13,
Name of Authorized Transporter of C	asinghead Gas or Dry Gas	Address (Give address to which appro	
11 well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Fige. D 19 16N 9 W	Is gas actually connected? Wh	en -
f this production is commingled w	ith that from any other lease or pool,	give commingling order number: New Well Workover Deepen	· Plug Back Same Resty. Diff. Res
Designate Type of Complet			
Date Spudied	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
HOLE SIZE	TUBING, CASING, AND	DEPTH SET	SACKS CEMENT
ΓEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be a)	fter recovery of total volume of load oil	and must be equal to or exceed top all
OII, WEI L. Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump, gas li	ift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	C41 - Bbls.	Water - Bbis.	Gas - MCF
JAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
hereby certify that the rules and	regulations of the Oil Conservation		<u> </u>
Commission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		BY Original Signed by The	
		TITLESUPERVISO	R DISTRICT # 3

E

Operator

(Date)

(Title)

Jan. 1, 1984

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for alloable on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of owner all name or number, or transporter, or other such change of condition Consists Frome Catha must be filed for each and in