

ANTA FE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
ILE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
.S.G.S.	<input type="checkbox"/>	<input type="checkbox"/>
..AND OFFICE	<input type="checkbox"/>	<input type="checkbox"/>
TRANSPORTER	OIL <input checked="" type="checkbox"/>	GAS <input type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PRORATION OFFICE	<input type="checkbox"/>	<input type="checkbox"/>

REQUEST FOR ALLOWABLE,
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and
Effective 1-1-65

RECEIVED BY
NOV 20 1986
O. C. D.
ARTESIA, OFFICE

Operator Mountain States Petroleum Corp.
Address P.O. Box 1936 Roswell, New Mexico 88201
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner Slayton Oil Corp, P.O. Box 1936 Roswell, New Mexico 88201

DESCRIPTION OF WELL AND LEASE

Lease Name State E 92	Well No. 4	Pool Name, Including Formation Brown Queen Grayburg	Kind of Lease State, Federal or Fee	State State	Lease E 92
Location Unit Letter <u>C</u> ; <u>660</u> Feet From The <u>No.</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>26</u> Township <u>10 S</u> Range <u>26 E</u> , NMPM, Chaves					

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 Company	Address (Give address to which approved copy of this form is to be sent) No. Freeman Ave. Artesia, New Mexico 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 26	Twp. 10S	Pge. 26 E	Is gas actually connected? No	When

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'v.	Diff. Re
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
			Post FD-3
			12-5-86
			Chg op

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 oil able 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 (pitot, 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.

Ruby Wiersham
(Signature)
Clerk
Sept. 1, 1986
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 3 1986, 19
BY Les A. Clements
Original Signed By
TITLE Supervisor District H

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.
Separate Form C-104 must be filed for each well to be entered