ANTA FE	REQUEST FOR ALLOW .E		form C +104 Supersedes Old C-104 and Effective 1-1-65	
.s.c.s.		AND ANSPORT OIL AND NATUR		.5
AND OFFICE		_		
TRANSPORTER GAS			RECEIVED BY	1
PRORATION OFFICE			JAN 121984	
Slayton Oil Corp.			O. C. D.	
Address Slayton U1			ARTESIA, OSSICE	
P. O. Box Recson(s) for filing (Check proper bo		v Mexico 88201 Other (Please explain	n)	,
Lew Well	Change in Transporter of:			
Recompletion Change in Ownership X	Oil Dry Go Casinghead Gas Conde	≓ 1		
If change of ownership give name and address of previous owner	Paul Slayton P.	<u>O. Box 1936, Ros</u>	well, New Mexico	8820
DESCRIPTION OF WELL AND	LEASE			
Levick/State &		F	! Leose Federal or Fee Ctat	Lease 2
Location				8879
Unit Letter M ; 99	O Feet From The So. Lir	ne and 990 Feet	From The West	·
Line of Section 15 To	cwinship 11 S Range 2	27 E , NMPM, C	haves	Cour
DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	ıs		
Name of Authorized Transporter of O Navajo Refining		No. Freeman Ave.		
Name of Authorized Transporter of C		Address (Give address to which		
None	Unit Sec. Twp. Fige.	Is gas actually connected?	Wher,	
If well produces oil or liquids, give location of tanks.	y	No	<u> </u>	
If this production is commingled w COMPLETION DATA	ith that from any other lease or pool,			
Designate Type of Complet	ion - (X) Gas well	New Well Workover Deep	Plug Back Same Res	tv. Diff. Re
Date Spudged	Date Compl. Ready to Prod.	Total Depth	F.E.T.D.	
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Otl/Gos Pay	Tubing Depth	-
Perforations			Depth Casing Shoe	
	TUBING, CASING, AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEM	IENT
TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be a	feer recovery of total volume of lo	oad oil and must be equal to or e	xceed top a
Oll, WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump,	gas lift, etc.) Part	12.3
	Tubing Pressure	Casing Pressure	Choke Size	7-84
Length of Test	TOLING PIESSEE		Gos-MCF	. O \$0 .
Actual Prod. During Test	Oil-Bbla.	Water - Bbls.	Gds • MCF	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
Teeting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size	
CERTIFICATE OF COMPLIAN	NCE	1	ERVATION COMMISSION	N
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED FEB 1	<u>3 1984</u>	19
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Original Signed By Lessie A. Clements		
		TITLE Supervisor		
			ed in compliance with RULE	
(Sign	nature)	Il watt this form must be ac	r allowable for a newly drille companied by a tabulation of accordance with RULE 111	I the gevie
Clerk		All sections of this fo	orm must be filled out comple	
στ Jan 1, 1984	itle)	able on new and recomple Fill out only Section	a I. II. III. and VI for char	nges of ow
(Date)		well name or number, or tra	insporter, or other such chang	te of cough