

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

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and
Effective 1-1-85

RECEIVED BY
JAN 12 1984
O. C. D.
ARTESIA, OFFICE

Operator	Slayton Oil Corp. ✓
Address	P. O. Box 2035 Roswell, New Mexico 88201
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

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

1. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Levick State	#1	Coyote Queen	State, Federal or Fee	State 68738
Location				
Unit Letter	G	1650 Feet From The No.	Line and 1650 Feet From The East	
Line of Section	15	Township 11 S	Range 27 E	NMFM, Chaves Count

1. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Navajo Refining Co.	No. Freeman Ave. Artesia, N M 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)					
None						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	15	11S	27E	No	

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

1. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Res.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.					
Elevations (DF, RKB, RT, GH, 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

1. 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.)	Post ID 3
Length of Test	Tubing Pressure	Casing Pressure	2-17-84
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Choke Size
			chg. 20
			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

1. 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 Wickesham
(Signature)
Clerk
Jan. 1, 1984
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 13 1984
Original Signed By
BY Leslie A. Clements
Supervisor District II
TITLE

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device 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 well name or number, or transporter, or other such change of condition.
Separate Form C-104 must be filed for each well to be drilled.



LTR



Job separation sheet

NEW MEXICO
OIL CONSERVATION COMMISSION

Drawer DD Artesia, NM

DISTRICT OFFICE #2

Sept. thru Dec. 1976

NO. 2110 R

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE 11-1-76

PURPOSE ALLOWABLE REVISION

Effective 11-1-76, the allowables of the following Paul
Slayton wells in the pool listed below are hereby revised
as indicated.

COYOTE QUEEN

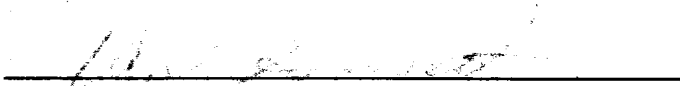
Levick D State #1-G, 15-11-27, increased to 3 BOPD.	Nov. total, 90 bbls Dec. " , 93 "
Levick D State #2-H, 15-11-27, increased to 2 BOPD.	Nov. total, 60 bbls Dec. " , 62 "
Levick D State #3-B, 15-11-27, increased to 2 BOPD.	Nov. total, 60 bbls Dec. " , 62 "

WAG:jw

Paul Slayton

NCO

OIL CONSERVATION COMMISSION


DISTRICT SUPERVISOR