			_			
NO 05 (00)						
DISTRIBUTION	 5 -	_				
SANTA FE	 , 			1	IEW M	EXICO
FILE	19-1					REQ
U.S.G.S.	 	\dashv				
LAND OFFICE	 		AUT	HOR	IZAT	ION T
TRANSPORTER OIL	7					
OPERATOR	2					
I. PRORATION OFFICE	∠					
Operator		/	 -			
Paul Slay	ton					
115 East	Coun	try (Club.	Ros	well	Ner
Reason(s) for filing (Check pr	roper be	×)				, 110
New Well		-	Change	in Tr	ansport	er of:
Recompletion			011		x	7
Change in Ownership X			Casing	head G	as 🗀	j
If change of ownership give	Ern	Est				
and address of previous owr	ner	т. А.	Hans	on,	Rox	1515
DESCRIPTION OF WELL	ANID		c r			
Lease Name	ANU	LEA	Well No	Poc	ol Name	e. Inclu
DeKalb Federal			1=			Que
Location					,, 0 00	· yuc.
Unit Letter A ;	3	30	Feet F	rom Ti	ne_N	orth
Line of Section 20	То	wnship		11S		Range
Name of Authorized Transporte	SPOR	TER	OF OI	LAN	D NA	TURA
Scurlock Oil Com	pany	ىما •	Gr	Conde	nsate	
Name of Authorized Transporte	r of Ca	singhe	ad Gas [<u> </u>	or Dry	Gas
	one					_
If well produces oil or liquids,		Unit	Se		Twp.	P.g
give location of tanks.		<u>, A</u>		<u>20</u>	11:	
If this production is comming COMPLETION DATA	led wi	th that	from a	ny oth	ner lea	se or p
Designate Type of Con	npletio	on — (X)	Oil We	11	Gas W
Date Spudded	<u> </u>		Compl.	Ready	to Pro	d.
			, ,	,	.0110	u.
Elevations (DF, RKB, RT, GR,	etc.j	Name	of Prod	ucing	Format	ion
Perforations		<u> </u>				-
			1	UBIN	IG, CA	SING,
HOLE SIZE			CASING	& T	UBING	SIZE
TEST DATA AND REQUES	ST FC	R AL	LOWA	BLE		t must
Date First New Oil Run To Tank	(5	Date o	f Test			- 10- 111
Length of Test		Tubino	Pressu	1 e		

November 8, 1967 (Date)

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	SANTA FE	NEW MEXICO OI	L CONSERVATION COMMISSION ST FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-				
	U.S.G.S.		AND	Effective 1-1-65				
	LAND OFFICE	AUTHORIZATION TO I	RANSPORT OIL AND NATURA	L GAS				
	TRANSPORTER OIL /							
	OPERATOR 2			_				
1.	PRORATION OFFICE Operator							
	Paul Slayton	✓		See Sea Con				
	Address							
	Reason(s) for filing (Check proper b	try Club, Roswell, New M	lexico 88201					
	New Well	Change in Transporter of:	Other (Please explain)					
	Recompletion	•	Gas Jerom Th	e Permian Cosp.				
Ĺ	Change in Ownership X	Casinghead Gas Con	densate	•				
1	f change of ownership give name	E. A. Hanson, Box 1515.	Roswell N.M. 1/2	tinental Oil Co., Box 431,				
. <u>1</u>	DESCRIPTION OF WELL AND	D LEASE		land, Texas 1/2				
	DeKalb Federal	Well No. Pool Name, including 1 Cayote Queen	· · · · · · · · · · · · · · · · · · ·	Ledse 140.				
	Location	- Jan Jose Gucch	Sidie, Fed	eral or Fee Federal NM-02146				
	Unit Letter A ; 3	Feet From The North	line and 330 Feet Fro	om The East				
	Line of Section 20 T	ownship 11S Bange	77E					
_			,	Chaves County				
. r	ESIGNATION OF TRANSPORMED OF Authorized Transporter of O	RTER OF OIL AND NATURAL O	GAS					
1	Scurlock Oil Company	, —		proved copy of this form is to be sent)				
Γ	Name of Authorized Transporter of Co	asinghead Gas or Dry Gas	414 Mid America Buildi Address (Give address to which app	ng, Midland, Texas proved copy of this form is to be sent)				
-	None	Unit Sec. Twp. Ege.						
ç	f well produces oil or liquids, rive location of tanks.	Unit Sec. Twp. Age.	·	When				
Ιf	this production is commingled w	ith that from any other lease or pool						
C	S.III EBITON DATA							
	Designate Type of Completi	on - (X) Gas Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.				
Г	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
E	levations (DF, RKB, RT, GR, etc.)	Name of Producing Formation						
Name of Producing Formation		Top Cil/Gas Pay	Tubing Depth					
P	Perforations			Depth Casing Shoe				
-		TIP III A CANADA						
	HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET					
			DEFINACI	SACKS CEMENT				
_	· · · · · · · · · · · · · · · · · · ·							
_								
TI	EST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	ifter recovery of total volume of load of	l and must be equal to or exceed top allow-				
	I. WELL ate First New Oil Run To Tanks	able for this d	Print or ou jor just 24 hours	•				
			Producing Method (Flow, pump, gas l	ift, etc.)				
L	ength of Test	Tubing Pressure	Casing Pressure	Choke Size				
Ac	ctual Prod. During Test	Oil-Bbls.	Water-Bbls.					
			ndtet - DD.B.	Gas - MCF				
~ .	le mer v							
_	AS WELL ctual Prod. Test-MCF/D	Length of Test	Phi- 0					
			Bbls. Condensate/MMCF	Gravity of Condensate				
Te	sting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size				
F	RTIFICATE OF COMPLIANC	F						
		E .	OIL CONSERVA	TION COMMISSION				
hereby certify that the rules and regulations of the Oil Conservation ommission have been complied with and that the information given			APPROVED					
. 0 13	imibalon nave been complied wi	th and that the information given best of my knowledge and belief.	BY W. a. Sne	sset				
			San Sarm Cara as a second	170P				
	^		TITLE NO. 100 August	.75 te de				
	anie le	est	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened					
(Signature) Clerk			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 all and					

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

Fill out only Sections I, II, III, and VI 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