

SI Oct 1998

put bk on
April 1999

DISTRIBUTION		
ANTAFE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
ILE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
.S.G.F.		
AND OFFICE		
TRANSPORTER	OIL <input checked="" type="checkbox"/>	
	GAS <input checked="" type="checkbox"/>	
PERATOR		
ORATION OFFICE		

**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 1-1-65

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

Mountain States Petroleum Corp. ✓
P.O. Box 1936 Roswell, New Mexico 88201

Person(s) for filing (Check proper box)	Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:	
Completion <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"/>

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							
Well Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.			
Levick C State	101	Coyote Queen	State, Federal or Fee State	E 8879			
Unit Letter	1	1650 Feet From The	So. Line and	990 Feet From The West			
Line of Section	15	Township	11 S.	Range	27 E	NMPM, Chaves	County

SIGNATION 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 Company	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)
None	

Well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	L	15	LLS	27E	No	

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. Res	
None Spudded									
Date Compl. Ready to Prod.	Total Depth			P.B.T.D.					
Producing Formations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
							Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			Post ID-3
			12-5-86
			ahg ap

TEST DATA AND REQUEST FOR ALLOWABLE				<i>(Test must be after recovery of total volume of load oil and must be equal to or exceed top all able for this depth or be for full 24 hours)</i>			
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	

TEST WELL							
Actual Prod. Test-MCF/D		Length of Test		Bbls. Condensate/MMCF		Gravity of Condensate	
Testing Method (pilot, 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 herein is true and complete to the best of my knowledge and belief.

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

OIL CONSERVATION COMMISSION

APPROVED DEC 3 1986, 19__

BY Les A. Clements
Original Signed By
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 deepened 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 owner, well name or number, or transporter, or other such change of conditions.