

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

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

NOV 18 1982

O. C. D.

ARTESIA, OFFICE

I.

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

Operator

Paul Slayton

Address

P O Box 1936 Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)

New Well ☐

Recompletion ☐

Change in Ownership ☐

Change in Transporter of:

Oil ☒

Casinghead Gas ☐

Dry Gas ☐

Condensate ☐

Other (Please explain)

*Request for allowable

If change of ownership give name and address of previous owner

NA

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sinclair State	Well No. #1	Pool Name, Including Formation Acme San Andres	Kind of Lease State, Federal or Fee	State State	Lease No. V-131
Location Unit Letter <u>E</u> ; <u>1650</u> Feet From The <u>N</u> Line and <u>990</u> Feet From The <u>W</u> Line of Section <u>5</u> Township <u>8S</u> Range <u>27 E</u> , NMPM, <u>Chaves</u> County					

III. 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 co.	Address (Give address to which approved copy of this form is to be sent) PO Bx 159, 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)				
If well produces oil or liquids, give location of tanks.	Unit <u>E</u>	Sec. <u>5</u>	Twp. <u>8S</u>	Rge. <u>27E</u>	Is gas actually connected? When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
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

V. 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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 11-8-82	Date of Test 11-8-82	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrss	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 5 BPD	Oil - Bbls. 5 BPD	Water - Bbls.	Gas - MCF

REQUEST 3 BPD ALLOWABLE

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

VI. 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.

OIL CONSERVATION COMMISSION

DEC 01 1982

APPROVED _____, 19

BY Leslie A. Clements

TITLE Supervisor District II

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 deviation tests taken on the well in accordance with RULE 111.

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 well in multiple

Ruby Wickersham
(Signature)

Clerk

(Title)

11/17/82

(Date)