

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		1
FILE		1-
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		2
PROMOTION 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 C-110
Effective 1-1-65

RECEIVED

JUL 21 1965

Operator		O. C. C. ARTESIA, OFFICE	
Avalanche Journal Publishing Company			
Address 220 West Sixth Amarillo, Texas			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	☐	Change in Transporter of:	Change in pool designation
Recompletion	☐	Oil ☐ Dry Gas ☐	
Change in Ownership	☐	Casinghead Gas ☐ Condensate ☐	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
LE Ranch 29	1-A	LE Ranch San Andres	State, Federal or Foreign
Location			
Unit Letter	A	330 Feet From The North Line and 330 Feet From The East	
Line of Section	29	Township 10 South Range 28 East	County, Chavez

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)		
Melwood Corp.	P.O. Box 330 Abilene, Texas		
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)		
TSTM			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Top. Rep.
	A	29	108 283
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	Recover	Deepen	Plug Back	Same Rec'y.	Diff. Rec'y.
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
Pool	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)

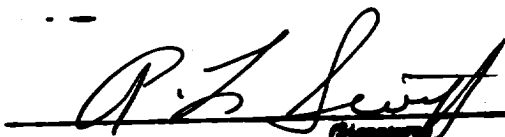
Date First New Oil Run To Tanks	Date of Test	Producing Method (Pilot, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure	Casing Pressure	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.


(Signature)

Coordinator

(Title)

July 20, 1965

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 26 1965, 10

BY 
TITLE OIL AND GAS REPORTER

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 logs 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 Sections I, II, III, and VI only for changes of owner, well name or number, or transportation or other such change of condition.
Form C-104 must be filed for each pool in multiple