

NEW MEXICO OIL CONSERVATION COMMISSION

SANTA FE, NEW MEXICO

Form C-127
Revised 1-1-65

REQUEST FOR ALLOWABLE CHANGES

One copy of Form C-127 shall be filed with the appropriate District Office of the Oil Conservation Commission not later than the 15th of the month preceding the month for which allowable changes are requested. This form shall include only the wells for which allowable changes are desired.

Date Nov. 19, 1980The following allowable changes for the month of November 19 80are hereby requested by Paul Slayton OperatorP O Box 1936 Roswell, New Mexico 88201 Address

No well can be assigned an allowable greater than the amount of oil produced on the latest G.O.R. test. For wells on which top allowable is desired, enter a "T" in the Allowable Requested Column.

POOL	LEASE	WELL NO.	UNIT	S	T	R	ALLOWABLE REQUESTED	REMARKS
ACME SAN ANDRES	Standard State	# 1	A	5	8	27	Increase to 3 BBL Per Da.	
	Standard State	#2,#3	B	5	8	27	Increase to 9 BBL per Da.	
RECEIVED								
NOV 20 1980								
O. C. D.								
ARTESIA, OFFICE								
Supp 2160 R								

It is further requested that all other wells operated by this producer be assigned the allowables that they are currently receiving with the exception that top allowable wells and wells affected by excessive gas-oil ratios be given the benefit of any increase in normal unit allowable.

Representing
Paul Slayton P O Box 1936 Roswell, N M

Signed *Ruby L. Wickersham*
Title Clerk

Operator

REQUEST FOR ALLOWABLE

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FEB 15 1980

O. C. D.
ARTESIA, OFFICE

Operator

Paul Slayton

Address

P O Box 1936 Roswell, New Mexico 88201

Person(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)

If change of ownership give name Mountain States Petroleum Corp. P O Box 1936 Roswell, N M 88201
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Standard State	Well No. 2	Pool Name, including Formation Acme San Andres	Kind of Lease State, Federal or Fee	State E3614°
Location				
Unit Letter B	330	Feet From The North	Line and 1650	Feet From The East
Line of Section 5	Township 8 South	Range 27 East	Chaves, NMPM,	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing Co.	No. Freeman Ave. Artesia, N Mex 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. <i>Connected Loc.</i>	Unit <i>BA</i> Sec. <i>5</i> Twp. <i>8 S</i> Rge. <i>27 E</i>
Is gas actually connected?	When
No	

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 Perv. Diff. P.
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		
					Posted ID 3-80 2-22-80 Jog		

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of land 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 (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Ebbls.	Water-Ebbls.	Gas-MCF
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Ebbls. Condensate-MWOF	Gravity of Condensate
Testing Method (shot, back pt.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-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 herein is true and complete to the best of my knowledge and belief.

OIL CONSERVATION COMMISSION

FEB 20 1980

APPROVED

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 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 ownership, name, or number, or testing method or other such change of condition. Sections I, II, III, and VI must be filed for each well.

Clerk

Jan. 1, 1980

(Signature)

(Title)

(Date)

DISTRIBUTION		
ANTAFE	1	
ILE	1	✓
S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		1
PRODUCTION 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-1
Effective 1-1-65

RECEIVED

APR 10 1974

Operator	Mountain States Petroleum Corp. ✓		
Address	P O Box 1936 Roswell, New Mexico 88201		
Reason(s) for Filing (Check proper box)	D. C. B. ARTESIA, OFFICE		
New Well	<input type="checkbox"/>	Change in Transporter of:	Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil <input checked="" type="checkbox"/>	
Change in Ownership	<input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	
		Dry Gas <input type="checkbox"/>	
		Condensate <input type="checkbox"/>	

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	Lease No.
Standard State	2	Acme San Andres	State, Federal or Fee State	E3614
Location				
Unit Letter	B	330 Feet From The	North	Line and 1650 Feet From The East
Line of Section	5	Township	8 S	Range 27 E, NMPM, Chaves County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Navajo Crude Oil Purchasing Co.	N. Freeman 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)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	B	5	8s	27E	NO	

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'v.	Diff. Res'v.
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	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

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.

Ruby Wickert
(Signature)
Clerk
(Title)
April 9, 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 16 1974
BY W. A. Gressett
TITLE OIL AND GAS INSPECTOR

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.