

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL ☒ GAS ☐
OPERATOR	
PRORATION 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 1-1-55

JUN 26 1973

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Operator H. E. Prince ✓	
Address 606 N. Atkinson, Roswell, New Mexico 88201	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of: Oil ☒ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐
Recompletion ☐	Other (Please explain) <i>From German</i>
Change in Ownership ☒	

If change of ownership give name and address of previous owner 2827 N. Lycomore
Paul Slayton, 115 E. Country Club, Roswell, New Mexico, 88201

Lease Name Elliott Federal		Well No. A	Pool Name, including Formation Linda San Andres	Kind of Lease State, Federal or Foreign Fed. LCO	Lease No. 68127
Location Unit Letter J ; 2310 Feet From The South Line and 2310 Feet From The East Line of Section 33 Township 6S Range 26E , NMPM, Chaves County					

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Crude Oil Purchasing Co.		Address (Give address to which approved copy of this form is to be sent) Drawer 159, Artesia, New Mexico 88210				
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐		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 J	Sec. 33	Twp. 6S	Rge. 26E	Is gas actually connected? No	When

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

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded 6-25-65	Date Compl. Ready to Prod. 7-6-1965	Total Depth 1094		P.B.T.D.					
Elevations (OF, 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			

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/MCF	Gravity of Condensate
Testing Method (pitot, 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 above is true and complete to the best of my knowledge and belief.

H. E. Prince
(Signature)
Owner
(Title)
6-12-73
(Date)

OIL CONSERVATION COMMISSION	
JUN 29 1973	
APPROVED	19
BY	<u>W. A. Grossett</u>
TITLE	OIL AND GAS INSPECTOR

This form is to be filed in compliance with RULES 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 C, D, E, and F for changes of owner, well name or location, or condition, or other such change of condition.
Separate Form C-104 must be filed for each pool in multiply