

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

JUN 21 1978

O. C. C.  
 ARTESIA, OFFICE

DISPOSITION	4
STATE FILE	/
U.S.G.S.	/
LAND OFFICE	/
TRANSPORTER	OIL / GAS /
OPERATOR	/
PRODUCTION OFFICE	/

Operator W.E. Jeffers

Address P.O. Box 65 Artesia, NM 88210

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	ADD LT NRC
Recompletion <input type="checkbox"/>	
Change In Ownership <input checked="" type="checkbox"/>	
Change In Transporter of Oil <input type="checkbox"/>	
Change In Transporter of Casinghead Gas <input type="checkbox"/>	
Change In Transporter of Dry Gas <input type="checkbox"/>	
Change In Transporter of Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner Rutter & Wilbanks, 210 Indiana St., Midland, TX 79701

Lease Name <u>Mcgruder State</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Empire Y-SR</u>	Kind of Lease State, Federal or Fee <u>State</u>	Lease No. <u>B4732</u>
Location				
Unit Letter <u>E</u>	<u>2310</u>	Feet From The <u>North</u>	Line and <u>330</u>	Feet From The <u>West</u>
Line of Section <u>36</u>	Township <u>17 S</u>	Range <u>27 E</u>	<u>NMPM,</u>	County <u>Eddy</u>

DESIGNATION 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)
<u>Navajo Crude Oil Purchasing Co.</u>	<u>N. Freeman Ave., Artesia, NM 88210</u>
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)
<u>None</u>	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

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

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

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 (flow, pump, etc.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

I hereby certify that the information given herein is true and correct to the best of my knowledge and belief.

W.E. Jeffers

OIL CONSERVATION COMMISSION  
 JUN 22 1978

APPROVED  
W.A. Gressitt  
 SUPERVISOR, DISTRICT II