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JUN 13 1983

O. C. D.
ARTESIA, OFFICEREQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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Operator JOE L. TARVERAddress 3405 69th DR. Lubbock, TEXAS 79413

Reason(s) for filing (Check proper box)

New Well ☐
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

CHANGE PHYSICAL OPERATORChange of ownership give name
and address of previous ownerTom R. Minihan
P.O. Box 4364 Midland, Texas 79701

DESCRIPTION OF WELL AND LEASE

Lease Name SRLG - UNIT Well No. 13 Pool Name, including Formation RED LAKE GRAYBARE Kind of Lease STATE Lease No. B 732Location Unit Letter E 2310 Feet From The NORTH Line and 990 Feet From The WESTLine of Section 36 Township 17 South Range 27 East, NMDM, Eddy County

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
NAVAJO REFINING CO. PIPE LINE DIVISIONAddress (Give address to which approved copy of this form is to be sent)
NORTH FREEMAN AVE., ARTESIA, N.M.Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
None

Address (Give address to which approved copy of this form is to be sent)

Does well produce oil or liquids,
or location of tanks.Unit I, Sec. 36 Twp. 17 Rge. 27Is gas actually connected? ☐ When

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

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.		
Conditions (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Iterations						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE
ON 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
Test Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

AS WELL

Test Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (prior, 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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Joe L. Tarver
(Signature)Owner
(Title)JUNE 10 - 1983
(Date)

OIL CONSERVATION DIVISION

JUN 21 1983

APPROVED _____, 12

BY Leslie A. ClementsTITLE 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 deviating 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 Form C-104 must be filed for each pool in multiple completed wells.