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G.S.		
ND OFFICE		
ANSPORTER	OIL	
	GAS	
CRATOR		
ORATION 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-111  
Effective 1-1-65

BY LAYTON ENTERPRISES, INC.

3103 79<sup>TH</sup> ST. LUBBOCK, TEXAS 79423

ion(s) for filing (Check proper box)	Other (Please explain)
Well <input type="checkbox"/>	CHANGE IN OWNERSHIP EFFECTIVE JUNE 1, 1979
Completion <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

Change of ownership give name and address of previous owner TENNECO OIL, 6800 PARK TEN BLVD., SAN ANTONIO, TX 78213

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
STENBOUGH "B"	3	BOUGH PERMO PENN	State, Federal or Fee <u>FEE</u>	

Location  
Init Letter B; 660 Feet From The NORTH Line and 1980 Feet From The EAST

Line of Section 14 Township 9 S Range 35 E, NMPM, LEA County

SIGNATURE 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>MOBIL PIPE LINE CO.</u>	<u>P.O. BOX 900 DALLAS, TEXAS 75221</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>ARDEN PETROLEUM</u>	<u>P.O. BOX 1589 TULSA, OKLAHOMA 74102</u>
Well produces oil or liquids, location of tanks.	Unit <u>A</u> Sec. <u>14</u> Twp. <u>9 S</u> Rge. <u>35 E</u> Is gas actually connected? <u>YES</u> When <u>1970</u>

If 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.
Spudded								
Date Compl. Ready to Prod.								
Total Depth								
P.B.T.D.								
ations (DF, RKB, RT, GR, etc.)								
Name of Producing Formation								
Top Oil/Gas Pay								
Tubing Depth								
Depth Casing Shoe								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE 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)

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

WELL

al Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Using Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

By certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given is true and complete to the best of my knowledge and belief.	OIL CONSERVATION COMMISSION JUL 27 1979 APPROVED _____, 19____ BY _____ Orig. Signed by Jerry Sexton TITLE _____ Dist 1, Supr
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Ronald L. Sexton  
(Signature)  
PRESIDENT  
(Title)  
JULY 19, 1979  
(Date)

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.