

P. O. BOX 2080

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NAME OF OFFICE RECEIVING	
DISTRIBUTION	
INITIALS	
FILE	
U.S.O.	
LANDS OFFICE	
TRANSPORTER	OIL OAS
OPERATION	
PRODUCTION OFFICE	
CONTROL	

MURPHY OPERATING CORPORATION

P. O. Drawer 2648, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☐	Change in Transporter of:		
Recompletion ☐	Oil ☐	Dry Gas ☐	
Change in Ownership ☒	Casinghead Gas ☐	Condensate ☐	

If change of ownership give name and address of previous owner Layton Enterprises, Inc., 3103 79th St., Lubbock, Texas 79423

STATUS: TEMPORARILY ABANDONED

DESCRIPTION OF WELL AND LEASE.

DESCRIPTION OF WELL AND LEASE				Kind of Lease	Lease No.
Lease Name WGS #1 Baetz Federal Com	Well No. 1	Pool Name, Including Formation Bluitt-San Andres Assoc.	State, Federal or Free Federal NM		044216
Location					
Unit Letter <u>E</u> : <u>660</u> Feet From The <u>West</u> Line and <u>1980</u> Feet From The <u>North</u>					
Line of Section <u>13</u> Township <u>8 South</u> Range <u>37 East</u> , NMPM, <u>Roosevelt</u> County					

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS ☐ or Condensate ☐

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil ☐ or Condensate ☐						
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	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

COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
Date Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
Perforations							Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

[illegible]

TEST DATA AND REQUEST FOR ALLOWABLE
WELL

TEST DATA AND REQUEST FOR ALLOWABLE		(Test made after recovery of total volume of lead oil or longer to allow oil to be removed from well for this data or to for full recovery)	
Oil First New Oil Run To Texas	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Control Used During Test	Oil-Beta.	Water-Beta.	Gas-MCF

10572

6-21-82, 81

1. *Chrysomelids*

DEC 18 1985

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

MURPHY, OPERATING CORPORATION

Mark B. Murphy (Signature)
President

December 16, 1985

This form is to be filed in compliance with RULE 102.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a certification of the District Engineer 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 own well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multi-

RECEIVED

DEC 17 1985

O.C.D.
HOBBS OFFICE

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		5. LEASE DESIGNATION AND SERIAL NO. <i>NM-044216</i>	
2. NAME OF OPERATOR <i>LAYTON ENTERPRISES, INC.</i>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR <i>3103 79th St. LUBBOCK, TEXAS 79423</i>		7. UNIT AGREEMENT NAME <i>KGS BAETZ FED.</i>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <i>1980' FNL 660' FWL SEC 13, T8S, R37E ROOSEVELT Co., N.M.</i>		8. FARM OR LEASE NAME	
14. PERMIT NO.		9. WELL NO. <i>1</i>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>7006</i>		10. FIELD AND POOL, OR WILDCAT <i>BLUETT S.A. Assoc.</i>	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>13-8-37</i>	
		12. COUNTY OR PARISH <i>ROOSEVELT</i>	
		13. STATE <i>N.M.</i>	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) <i>Temporarily Abandon</i>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(Other) ☐	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

INTEND TO CONTINUE TA STATUS OF THIS WELL
PENDING WATERFLOOD STUDY NOW IN PROGRESS.
WE NOW EXPECT WATERFLOOD DEVELOPMENT
IN 1979 AND THIS WELL WILL BE USED
IN THAT PROGRAM, PROBABLY AS A PRODUCING
WELL.

This approval of temporary
abandonment expires *8-31-79*

18. I hereby certify that the foregoing is true and correct

SIGNED *Ronald L. Sifton* TITLE *PRESIDENT*

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

DATE *8-5-78*

