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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION 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-11
Effective 1-1-65

Operator LAYTON ENTERPRISES, INC.	
Address 3103 79TH ST. LUBBOCK, TEXAS 79423	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of ☐
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☒	Casinghead Gas ☐ Condensate ☐
Other (Please explain) CHANGE IN OWNERSHIP AND OPERATOR EFFECTIVE 3-1-78	

If change of ownership give name and address of previous owner **PEIRO GRANDE, INC. 4219 EIGHTH AVE. DALLAS, TX. 75200**

2. DESCRIPTION OF WELL AND LEASE

Lease Name BATEL FEDERAL COM	Well No. 1	Pool Name, including Formation ELUIT SAN ANTONIO ASSOC.	Kind of Lease State, Federal or Fed FEDERAL NM-044216	Lease No.
Location				
Unit Letter E	660	Feet From The WEST Line and 1480	Feet From The NORTH	
Line of Section 13	Township 8S	Range 57E	N.M.P.M. ROOSEVELT	County

3. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent) P.O. Box 900 DALLAS, TX. 75201					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent) ELUIT PLANT MILNEBERG, N.M. 88125					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 13	Typ. SS	Rge. 57E	Is gas actually connected? YES	When JULY 1969

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 Hole	Prod. Res'v.
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		Testing Depth			
Perforations		Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD								
POLE 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 (pilot, 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.

Donald R. Layton
(Signature)

PRESIDENT
(Title)

5-10-78

OIL CONSERVATION COMMISSION

APPROVED **MAE L.**, 19

BY **Jerry Seaton**
TITLE **Dist. L. Sec'y.**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowance for a newly drilled or deepened well, this form must be accompanied by a tabulation of test data taken on the well in accordance with RULE 1104.

All sections of this form must be filled out completely for allowance or denial to be completed within.

Fill out only Sections I, II, III, and VI for change of ownership.