## NEW MEXICE OIL CONSERVATION COMMISSION SANTA FE REQUEST FOR ALLOWABLE FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATUR AND OFFICE OIL TRANSPORTER OPERATOR I. PRORATION OFFICE 11

| Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65 |                 |  |  |  |  |  |  |  |  |
|---|-----------------|--|--|--|--|--|--|--|--|
| AL GAS  |                 |  |  |  |  |  |  |  |  |
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| 8240  |                 |  |  |  |  |  |  |  |  |
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| May 1, 1972   |                 |  |  |  |  |  |  |  |  |
|   |                 |  |  |  |  |  |  |  |  |
| LC-0684   | 74              |  |  |  |  |  |  |  |  |
| Lease   | Lease No.       |  |  |  |  |  |  |  |  |
| ederal or Fee Federal                                     | above           |  |  |  |  |  |  |  |  |
| From The  |                 |  |  |  |  |  |  |  |  |
| Chaves  | County          |  |  |  |  |  |  |  |  |
|   |                 |  |  |  |  |  |  |  |  |
| approved copy of this form is to                          | be sent)        |  |  |  |  |  |  |  |  |
| 1, Texas 79701  |                 |  |  |  |  |  |  |  |  |
| approved copy of this form is to                          | be sent)        |  |  |  |  |  |  |  |  |
| When  | -               |  |  |  |  |  |  |  |  |
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| en Plug Back Same Res'                                    | v. Diff. Resfv. |  |  |  |  |  |  |  |  |

|      | Operator  |   |              |                             |  |   |                      | ·····   |              |  |  |  |  |
|------|---|---|--------------|-----------------------------|--|---|----------------------|---|--------------|--|--|--|--|
|      | Weldon S. Guest & I. J  | . Wolfo   | n            |                             |  |   |                      |   |              |  |  |  |  |
|      | Address   |   |              |                             |  |   |                      |   |              |  |  |  |  |
|      | c/o Oil Reports & Gas   |   | s, Inc.,     | Box 763                     |  |   |                      | 40  |              |  |  |  |  |
|      | · —   | Reason(s) for filing (Check proper box)  New We!l Change in Transporter of:  Recompletion Dry C |              |                             |  |   |                      | Other (Please explain)  Effective May 1, 1972 |              |  |  |  |  |
|      | Recompletion  |   |              |                             |  |   |                      |   |              |  |  |  |  |
|      | Change in Ownership   | Casin   | nsate        |                             |  |   |                      |   |              |  |  |  |  |
|      | If change of ownership give name  | Chavez  | Oil Ltd      | ., Hobbs                    | , New Me   | xico                                    |                      |   |              |  |  |  |  |
| Ħ    | and address of previous owner   |   |              |                             |  |   |                      |   |              |  |  |  |  |
|      | DESCRIPTION OF WELL AND LEASE  Lease Name   |   |              | ormation                    |  | Kind of Lea                             |                      |   |              |  |  |  |  |
|      | Sand Unit Tract 6 8 Caprock Qu  |   |              |                             | ueen   |   | State, Fede          | ral or Fee Federal                            | above        |  |  |  |  |
|      | Unit Letter 0; 660  | ) Feet  | From The S   | outh Li                     | ne andl  | .980                                    | Feet From            | The <b>East</b>                               |              |  |  |  |  |
|      | Line of Section 3 To  | wnship  | 14 S         | Range                       | 31 E   | , NMPM                                  | 1,                   | Chaves  | County       |  |  |  |  |
| III. | DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   |   |              |                             |  |   |                      |   |              |  |  |  |  |
|      | Name of Authorized Transporter of Oil or Condensate   |   |              | 1                           | Address (Give address to which approved copy of this form is to be sent)  Box 1510, Midland, Texas 79701 |   |                      |   |              |  |  |  |  |
|      | Texas-New Mexico Pipe   |   |              | y Gas                       |  |   |                      | oved copy of this form is i                   | to be sent)  |  |  |  |  |
|      |   |   |              | —                           |  |   | ••                   | •, •, •, •, •, •, •, •, •, •, •, •, •, •      | <b>,</b>     |  |  |  |  |
|      | If well produces oil or liquids,  | 1   | Sec. Twp     |                             | Is gas actu  | ally connect                            | ed? W                | /hen  |              |  |  |  |  |
|      | give location of tanks.   | G   | 3 1          | 45 31 E                     |  | No                                      |                      |   | <del> </del> |  |  |  |  |
| IV.  | If this production is commingled win COMPLETION DATA  | th that from  |              |                             | give commi   |   | r number:            |   | <del></del>  |  |  |  |  |
|      | Designate Type of Completion - (X)  |   |              | New Well                    | Workover   | Deepen                                  | Plug Back   Same Res | s'v. Diff, Res'v.                             |              |  |  |  |  |
|      | Date Spudded Date Compl. Ready to Prod.   |   |              | Total Depth                 |  |   | P.B.T.D.             |   |              |  |  |  |  |
|      |   |   |              |                             |  |   |                      |   |              |  |  |  |  |
|      | Elevations (DF, RKB, RT, GR, etc.)  | (DF, RKB, RT, GR, etc.) Name of Producing Formation   |              |                             |  | as Pay                                  |                      | Tubing Depth                                  |              |  |  |  |  |
|      | Perforations  |   |              |                             |  |   |                      | Depth Casing Shoe                             |              |  |  |  |  |
|      |   |   | TUBING,      | CASING, AN                  | D CEMENTI  | NG RECOR                                | !D                   |   |              |  |  |  |  |
|      | HOLE SIZE   | CASING & TUBING SIZE  |              |                             |  | DEPTH S                                 | ET                   | SACKS CEMENT                                  |              |  |  |  |  |
|      |   | <u> </u>  |              |                             | ļ  | ····                                    |                      |   |              |  |  |  |  |
|      |   |   |              | <del></del>                 |  |   |                      |   |              |  |  |  |  |
|      |   | <del> </del>  |              |                             | -  |   |                      |   |              |  |  |  |  |
| V.   | TEST DATA AND REQUEST FOR ALLOWABLE  (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-Bble.   |              |                             | Water - Bbls.  |   |                      | Gas - MCF                                     |              |  |  |  |  |
|      | GAG NIDAY   | <u> </u>  |              |                             | J  |   |                      |   |              |  |  |  |  |
|      | Actual Prod. Teet-MCF/D   | Length of   | Test         | <del></del>                 | Bbis. Cond   | lensate/MMC                             | F                    | Gravity of Condensate                         | <del> </del> |  |  |  |  |
|      |   |   |              |                             |  | , | -                    | •   |              |  |  |  |  |
|      | Testing Method (pitot, back pr.)  | Tubing Pre  | ssure (Shut- | in)                         | Casing Pre   | ssure (Shut                             | -in)                 | Choke Size                                    |              |  |  |  |  |
| VI.  | CERTIFICATE OF COMPLIANCE   |   |              | OIL CONSERVATION COMMISSION |  |   |                      |   |              |  |  |  |  |
|      |   |   |              |                             | APPRO  | APPROVED                                |                      |   |              |  |  |  |  |
|      | I hereby certify that the rules and regulations of the Oil Conservation  Commission have been complied with and that the information given  |   |              |                             |  | Orig. Signed by                         |                      |   |              |  |  |  |  |
|      | the state and applicable to the beat of our formulation and the state of the state |   |              |                             |  | Orig. Signed by                         |                      |   |              |  |  |  |  |

above is true and complete to the best of my knowledge and Joe D. Ramey Dist. I, Supv. TITLE \_ 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. Agent All sections of this form must be filled out completely for allowable on new and recompleted wells. (Title) 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. June 9. 1972 Separate Forms C-104 must be filed for each pool in multiply completed mails (Date)

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JUN 9 1972
OIL CONSERVATION COMM.
HOBBS, N. M.