## NEW MEAILL OIL CONSERVATION COMMISSION Form C-104 SANTA FE REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 FILE AND J.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS AND OFFICE OIL TRANSPORTER OPERATOR PRORATION OFFICE Weldon S. Guest & I. J. Wolfon c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexico 88240 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Effective May 1, 1972 Recompletion OIL Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner \_\_\_ Chavez Oil Ltd., Hobbs, New Mexico LC-068474 II. DESCRIPTION OF WELL AND LEASE Name Drickey Queen 6 Well No. Pool Name, Including Formation Caprock queen Kind of Lease Legse No. State, Federal or Fee Federal Location 664.75 North 1980 West Unit Letter Feet From The\_ Line and Feet From The 3 14 S 31 E Chaves Line of Section Township Range NMPM. County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil M or Condensate Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas 79701 Name of Authorized Transporter of Casinghead Gas \_\_\_\_\_ or Dry Gas \_\_\_ Address (Give address to which approved copy of this form is to be sent) Unit G Is gas actually connected? When TAS BE If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA New Well Oil Well Gas Well Plug Back Same Res'v. Diff. Res'v Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT 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) OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) Length of Test Tubing Pressure using Pressure Choke Size Oil - Bbla. Water - Bbls. Actual Prod. During Test Gas - MCF **GAS WELL** Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size OIL CONSERVATION COMMISSION

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## VI. 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.

| Konne Helles         |  |
|----------------------|--|
| (Signature)<br>Agent |  |
| (Title)              |  |

June 9, 1972

(Date)

JUN 12 1972 19. APPROVED Orig. Signed by Joe D. Ramey BY\_

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.

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, I name or number, or transporter, or other such change of condition.

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

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JUN 9 1972
OIL CONSERVATION COMM.

HOBBS, N. M.