Supersedes Old C-104 and C-110 Effective 1-1-65

NEW MEAILS OIL CONSERVATION COMMISSION Form C-104 SANTA FE REQUEST FOR ALLOWABLE FILE AND ن.s.G.s. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS AND OFFICE TRANSPORTER OPERATOR PRORATION OFFICE Operator Weldon S. Guest & I. J. Wolfson 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 Dry Gas Change in Ownership Casinghead Gas Condensate Chavez Oil Ltd., Hobbs, New Mexico If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease Name Legse No. se Name Drickey Queen Sand Unit Tract Caprock Queen State, Federal or Fee State B-10420 ; 660 Feet From The North Line and 1980 Unit Letter\_ B Feet From The East Chaves 14 S 31 E 16 Township Range , NMPM, County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas Twp. Sec. P.ge. Is gas actually connected? When Unit 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 Plug Back Same Res'v. Diff. Res'v. Gas Well Designate Type of Completion - (X) Date Compl. Ready to Prod. P.B.T.D. Date Spudded Total Depth Top Oil/Gas Pay Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT (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 Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Tubing Pressure Casing Pressure Choke Size Length of Test Water-Bbls. Gas - MCF Oil-Bbls. Actual Prod. During Test

V. TEST DATA AND REQUEST FOR ALLOWABLE

**GAS WELL** Bbls. Condensate/MMCF Gravity of Condensate Length of Test Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) Tubing Pressure (Shut-in ) Casing Pressure (Shut-in) Choke Size

TITLE ...

## 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.

Donna Holles
(Signature)
Agent
(Title)

June 9, 1972

(Date)

OIL CONSERVATION COMMISSION

APPROVED_	JUN 12 1972
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BY	Dist. I, Supr.

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.

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

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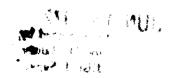
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OIL CONSERVATION COMM. HOBBS, N. M.