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TRANSPORTER	OIL	
	GAS	
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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-110  
Effective 1-1-65

I. Operator  
**I. J. Wolfson & Weldon S. Guest dba Chaves Oil Ltd.**  
Address  
**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:  
Recompletion ☐ Oil ☐ Dry Gas ☐ **Effective 12/1/71**  
Change in ownership ☒ Casinghead Gas ☐ Condensate ☐

If change in ownership give name and address of previous owner **Phillips Petroleum Co., Odessa, Texas 79760**

II. DESCRIPTION OF WELL AND LEASE **LC-068264**  
Lease No. **Tr. 5** Well No. **4** Pool Name, Including Formation **Caprock Queen Chaves** Kind of Lease **Federal** Lease No. **above**  
Location  
Unit Letter **E** **1650** Feet From The **North** Line and **990** Feet From The **West**  
Line of Section **17** Township **14S** Range **31E**, NMPM, **Chaves** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
**Texas-New Mexico Pipeline Company** 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 ☐  
**None** 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 **E** Sec. **17** Twp. **14S** Rge. **31E** Is gas actually connected? **No** When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA  
Designate Type of Completion - (X)  
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.  
Elevations (DH, 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 DEPTH SET SACKS CEMENT

V. 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/MMCF Gravity of Condensate  
Testing Method (pitot, back pr.) Tubing Pressure (shut-in) Casing Pressure (shut-in) Choke Size

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.  
**W. H. Holler**  
(Signature)  
**Agent**  
(Title)  
**12/7/71**

OIL CONSERVATION COMMISSION  
APPROVED **JAN 24 1972**, 19  
Orig. Signed by  
**John Runyan**  
Geologist  
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 allow-

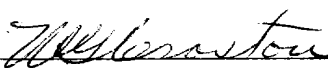
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NUMBER OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS PRODUCTION OFFICE OPERATOR		NEW MEXICO OIL CONSERVATION COM. ION SANTA FE, NEW MEXICO <b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION          TO TRANSPORT OIL AND NATURAL GAS</b>		<b>FORM C-110</b> (Rev. 7-60)
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE <b>3:34</b>				
Company or Operator <b>Phillips Petroleum Company</b>			Lease <b>West Cap Queen Sand Unit</b>	Well No. <b>Tr. 5 - 4</b>
Unit Letter <b>E</b>	Section <b>17</b>	Township <b>14S</b>	Range <b>31E</b>	County <b>Chaves</b>
Pool <b>Caprock Queen</b>			Kind of Lease (State, Fed, Fee) <b>Fed.</b>	
If well produces oil or condensate give location of tanks		Unit Letter <b>F</b>	Section <b>17</b>	Township <b>14S</b>
				Range <b>31E</b>
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Texas-New Mexico Pipeline Company</b>			Address (give address to which approved copy of this form is to be sent) <b>Box 1510 - Midland, Texas</b>	
Is Gas Actually Connected? Yes _____ No <input checked="" type="checkbox"/>				
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)	
If gas is not being sold, give reasons and also explain its present disposition: <b>Gas produced is of insufficient quantity for sale; any gas, if produced, will be          utilized in operation of Unit equipment.</b>				
REASON(S) FOR FILING (please check proper box)				
New Well ..... <input type="checkbox"/> Change in Ownership ..... <input type="checkbox"/> Change in Transporter (check one)      Other (explain below) Oil ..... <input type="checkbox"/> Dry Gas ..... <input type="checkbox"/> <b>Unitization: R-3223    10-18-62</b> Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/> <b>R-3226        "</b>				
Remarks <b>Effective 1-1-63. (Formerly T. F. Hodge - Malco Fed. Well No. <del>3223</del> 4)</b>				
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with. Executed this the <u>27</u> day of <u>December</u> , 19 <u>62</u> .				
OIL CONSERVATION COMMISSION			By	
Approved by				
Title			<b>District Chief Clerk</b>	
Date			Company <b>Phillips Petroleum Co. - Operator</b>	
			Address <b>Box 2105 - Hobbs, New Mexico</b>	