HD, OF COPIES RELI		1	
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FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			
Operator			

NEW MEXICO OIL CONSERVATION COMMIST N REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104	
Supersedes Old C-104 and C+1 Effective 1-1-65	116

LAND OFFICE	-	AND ON TOIL AND NATURA	L GAS	
TRANSPORTER GAS	-			
OPERATOR DECISE				
Operator Operator				
LAYTON ENTERPRI	SES, INC.			
	reet, Lubbock, Texas 7942			
Reason(s) for filing (Check proper box	Change in Transporter of:	Other (Please explain)		
Recompletion	Oil Dry Go	□s ☐ Change Effecti	ve September 8, 1976	
Change in Ownership X	Casinghead Gas Conde	nsate		
If change of ownership give name and address of previous owner	NURPHY MINERALS CORPORATI	ON, P.O. Drawer 2164,	Roswell, New Mexico 88201	
DESCRIPTION OF WELL AND	LEASE	formation Kind of L		
No.Caprock Queen Unit #	, , , , , , , , , , , , , , , , , , , ,		deral or Fee State B 10973 1	
Unit Letter 0 ; 66	60 Feet From The South Lin	ne and 1980 Feet Fro	om The East	
Line of Section 6 To	wnship 13S Range 3	ZE , NMPM, L	.ea County	
DECLOS APPLOY OF TO ANCHOR	TEN OT OUR ARID MACRIMAN CH			
Name of Authorized Transporter of Oil	A		proved copy of this form is to be sent)	
NAVAJO REFINING COMPANY		No. Freeman Ave., Artesia, New Mexico 88210 Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (trive address to which ap	proved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. A 6 13S 32E	Is gas actually connected?	When	
	th that from any other lease or pool,	give commingling order number:		
Designate Type of Completion	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. 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 O!I/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shoe	
	T	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a		oil and must be equal to or exceed top allow-	
OIL WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump, gas	ilift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Pros. During Tost	Oil-Bbis.	Water-Bbls.	Gca - MCF	
Actual Prod, During 1631	Oit-Buis.	Water - 20101		
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Teating Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
CERTIFICATE OF COMPLIAN	CE ·	OIL CONSER	VATION COMMISSION	
I hereby certify that the rules and r Commission have been complied v	ith and that the information given	APPROVED, 19		
above is true and complete to the	beat of my knowledge and belief.	lohn Runyan		
\bigcirc		TITLE Geo	logist	
Donald	Ka Chitas	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a nawly drilled or deepened		
(Signature) well, this form must be accompanied by a tabulation of			ipanied by a tabulation of the daviation	
President - Layton Enterprises, Inc. All mottlons of this form		wist be filled out completely for allow-		
8 -14-76 Fill out only Sections I. II. III. and VI for o		II. III. and VI for changes of owner,		
(Date)		well name or number, or transporter, or other such change of condition.		

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