	HO. OF COPIES RECEIVED DISTRIBUTION SANTA FE		DINSERVATION COMMIS	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
	FILE U.S.G.S. LAND OFFICE	AUTHORIZATION TO TRA	AND NSPORT OIL AND NATURAL G	
:	IRANSPORTER GAS			
	OPERATOR PROBATION OFFICE			
	Operator LAYTON ENTERPRISES, INC.			
	Address 3103 - 79th Street, Lubbock, Texas 79423			
	Reuson(s) for filing (Check proper box) Other (Please explain)			
	New Wall Change in Transporter of: Decomplation Oil Dry Gas Change Effective September 8, 1976			
	Recompletion Oil Dry Gas Oll Change in Ownership Casinghead Gas Condensate			
	If change of ownership give name MURPHY MINERALS CORPORATION, P.O. Drawer 2164, Roswell, New Mexico 88201 and address of previous owner			
••	DESCRIPTION OF WELL AND I	LEASE Well No. Pool Name, Including Fo	ormation Kind of Lease	Lease No.
	No. Caprock Queen Unit #	1 11 Caprock Que	en (Lea) State, Føderal	or Fee State OG 1922
	Location K : 1880 Feet From The South Line and 1980 Feet From The West			
		mship]3S Range 3	2Е , ммрм, Le	a County
1				
÷1.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of OII I or Condensate Address (Give address to which approved copy of this form is to be sent)			
	NAVAJO REFINING COMPANY No. Freeman Ave			ia, New Mexico 88210 ed copy of this form is to be sent)
	Name of Authorized Hunspoller of Cas	· · · · · ·		
	li well produces oil or liquids, give location of tanks. A 6 13S 32E NO			
	If this production is commingled with that from any other lease or pool, give commingling order number:			
۷.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completic	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
		Name of Producing Formation	Top O!l/Gas Pay	Tubing Depth
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		
	Perforations Depth Casing Snoo			Depth Casing Shoe
			CEMENTING RECORD	SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
				· · · · · · · · · · · · · · · · · · ·
2	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 allow OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	t, etc.)
	Longth of Test	Tubing Pressure	Casing Pressure	Choka Size
	Actual Pred, During Test	Cil-Bbls.	Water-Bbls.	Gcs-MCF
				<u> </u>
	GAS WELL			
	Actual Frod. 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
	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	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.		APPROVED, 19	
			BYOrig. Signed by John Runyan TITLEGeologist	
			TITLE Geologist This form is to be filed in compliance with RULE 1104.	
	Donald K. Saiton		The last sequent for allow	whis for a nawly drilled or despended
	(Signature) President - Layton Enterprises, Inc. (Title) 8-19-76		Well, this form must be accompanied by a tabulation of the deviation toats taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow- able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of owner,	
		4 - 76	Well name or number, or transport	er, or other soch change of construct
	· ·		Separate Forma C-104 mus completed wells.	t be filed for each pool in multiply

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