

WATER	☒	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	Form O-104 Superseding OIL C-101 and C-110 Effective 1-1-65
FILE	☒		
U.S.G.S.	☒		
LAND OFFICE	☒		
TRANSPORTER	☒		
OPERATOR	☒		
PRODUCTION OFFICE	☒		

Operator	
M & W of Lovington, Inc.	
Address	
2400 South Main Street (P.O. Box 922) Lovington, New Mexico 88260	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☒	Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner	Texco Oil Company, P.O. Box 4436, Wichita Falls, Texas 76308
	(Roy H. Smith Drilling Co.)

DESCRIPTION OF WELL AND LEASE				
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Buffalo Unit	11	Undesignated	State, Federal or Fee Federal	01177A
Location				
Unit Letter	L	2310 Feet From The South Line and 330 Feet From The West		
Line of Section	35	Township 18S	Range 33E	NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil ☐ or Condensate ☐			Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒			Address (Give address to which approved copy of this form is to be sent)	
Continental Oil Co.			P.O. Box 1206, Maljamar, N.M. 88264	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.
Is gas actually connected?			When	

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

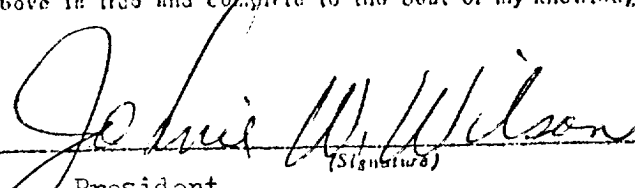
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
7/12/69	7/18/69		4685'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3731 Gr.	Basal Penrose		4584'		4506			
Perforations					Depth Casing Shoe			
4584-94', 4613-18, 4633-35'					4685			

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8" 28#	250'	150 SX
7-7/8"	4-1/2" 9.5#	4685'	300 SX

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)
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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
1,710	24 hrs.	-0-	-0-
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Pitot	350	-0-	3/4"

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____	
 President		BY _____	
		Orig. Signed by _____	
		Les. Comm. _____	
TITLE _____		Oil & Gas Insp.	
August 1, 1980		This form is to be filed in compliance with RULE 1104.	
(Date)		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.	