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SANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTED
OIL
GAS
OPERATOR
PRODUCTION OFFICE

OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-61

I. Operator
Holly Energy Inc.
Address
P.O. Box 726 Artesia, New Mexico 88210
Reason(s) for filing (check proper box)
New Well ☒ Change in Transporter of:
Redcompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Gashead Gas ☐ Condensate ☐
Overhaul (if case, explain) FLARED AFTER 12/1/83
UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.

If change of ownership, give name and address of previous owner
THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.
II. DESCRIPTION OF WELL AND LEASE
Lease No. 1 Young Bone Springs, North Field State IG6977
Location
Unit Letter L 2080 Feet From The South Line and 660 Feet From The West
Section 2 18-S Range 32-E Lea State

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Gashead ☐
Navajo Crude Oil Purchasing P.O. BOX Drawer 175 Artesia, N.M. 88210
Name of Authorized Transporter of Gashead Gas ☐ or Dry Gas ☐
If well produces oil or liquids, give location of tanks. Unit L Sec. 2 Twp. 18-S Rge. 32-E Is gas currently collected? 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) ☒ Oil Well ☐ Gas Well ☒ New Well ☐ Reducer ☐ Deepen ☐ Plug Back ☐ None Ready ☐ None Ready
Date Started 6-23-83 Date Compl. Ready to Prod. 8-25-83 Total Depth 8640 P.B.T.D. 8561
Elevations (OF, HKB, RT, GR, etc.) 3871.6 Name of Producing Formation 2nd Bone Springs Top Oil/Gas Pay 8508 Tubing Depth 8500
Perforations 8508-8518 Depth Casing Shoe 8637
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17 1/2" 13 3/8 653 750 sacks
11" 8 5/8 4490 1600 sacks
7 7/8" 4 1/2 8637 950 sacks
2 3/8 8500

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be an indicator of total volume of load oil and must be equal to or exceed that able for this design or be for full 24 hours)
OH WELL
Date First New Oil Run To Tanks 8-18-83 Producing Method (Flow, pump, gas lift, etc.) Pumping
Length of Test 24 Casing Pressure 0 Choke Size TSTM
Actual Prod. During Test 45 oil-0.820 Water-Boils. 0 Gas-MGF TSTM

GAS WELL
Actual Prod. Test (oil & gas) 0 Length of Test 0 Base Casing Pressure (PSI) 0 Gravity of Condensate 0
Testing Method (pilot, back prod.) 0 Testing Pressure (PSI) 0 Casing Pressure (PSI) 0 Choke Size 0

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.
Robert L. Lloyd
(Signature)
Production Superintendent
(Title)
8-26-83
(Date)
OIL CONSERVATION COMMISSION
AUG 31 1983
APPROVED _____, 19____
BY ORIGIN DEPT. SECTION
TITLE DISTRICT SUPERVISOR
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 district 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 change of well name or number or transporter or for each change of owner.