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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form C-101
Supersedes Old C-101 and C-1
Effective 1-1-65

Correction

RECEIVED

FEB 6 '80

Operator
D. B. Baxter

Address
P. O. Box 4171, Midland, Texas 79701

OIL CONSERVATION DIV.

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☐	Change in Transporter of:	Salt Water Disposal Well	
Recompletion ☐	Oil ☐	Dry Gas ☐	(Effective 12/1/79)
Change in Ownership ☒	Casinghead Gas ☐	Condensate ☐	

If change of ownership give name and address of previous owner
Hiram W. Keith & Dalton Haines, Box 244, Kermit, Texas 79745

DESCRIPTION OF WELL AND LEASE

Lease Name State "C"	Well No. 2	Pool Name, Including Formation Wilson, Seven Rivers West	Kind of Lease State, Federal or Fee	State	Lease No. B-7849
Location Unit Letter I ; 990 Feet From The East Line and 1980 Feet From The South					
Line of Section 16 Township 21-S Range 34-E 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)					
None						
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
None						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	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 Reservoir	Prod. Hole
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, 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

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 oil 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 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 (flow, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

R. Busley
(Signature)
Agent
February 4, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED *FEB 6 1980*, 19
BY *Les Clements*
TITLE *Oil & Gas Insp.*
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 viscosity tests taken on the well in accordance with RULE 111.
All portions 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 ownership name or number, or transporter, or other such change of condition.