

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Grande Rd., Aztec, NM 87410

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

Operator LANEXCO, INC.		Well APT No. 30-025-06430
Address P.O. BOX 1206 JAL, NM 88252		
Reason(s) for Filing (Check proper box) New Well ☐ Change in Transporter of: Recompletion ☐ Oil ☒ Dry Gas ☐ Change in Operator ☐ Casaghead Gas ☐ Condensate ☐		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Alves "A"	Well No. 1	Pool Name, Including Formation Eumont Yates SRQ	Kind of Lease Other (Please explain)	Lease No.
Location Well Letter P : 330 Feet From The South Line and 660 Feet From The East Line Section 7 Township 21S Range 37E NMPM Lea County				

III. 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 Casaghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
Sid Richardson Gasoline Co.	210 Main St. Fort Worth, TX 76102	
If well produces oil or liquids, give location of tanks.	Unit P Sec. 7 Twp. 21S Rgn. 37E	Is gas actually connected? Yes When? June 1954
If this production is commingled with that from any other lease or pool, give commingling order number.		

V. 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.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Performance					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	BAGS CEMENT

VI. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of found oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank	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/MCF	Gravity of Condensate
Casing Method (prod. back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VII. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature 
Robert W. Lansford President
Printed Name
11-16-93 505-395-3056
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **NOV 18 1993**

By **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.