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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 OIL C-101 and C-1
Effective 1-1-65

Operator
LLANO, INC.

Address
P.O. Box 1320, Hobbs, N.M. 88240

Reason(s) for filing (check proper box)

New Well ☐ Change in Transporter of: Drip ☒
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Conduthead Gas ☐ Conduthead ☐

Other (Please explain) Converted to a gas storage well & changed well name from Llano "33" State Com.

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name GRM Unit	Well No. and Name, including Completion 3 Grama Ridge Morrow	Kind of Lease State, Federal or Fee State	Lease No. E 7574
Location Unit Letter, J, 1980 Feet From The South, 1980 Feet From The East Line of Section 33 Township 21S Range 34E			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil () or Conduthead (X) See attachment	Name of Authorized Transporter of Conduthead Gas () or Dry Gas (X) Llano, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1320, Hobbs, N.M. 88240
If well produces oil or liquids, give location of tanks.	Unit J Sec. 33 Twp. 21S Range 34E	Is well actually connected? Yes-gas storage & withdrawal well

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	Oil Well	New Well	Workover	Deepen	Plug Back	Core Restoration	Other
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, CL, etc.)	Name of Producing Formation	Top of Casing	Tubing Depth					
Perforations	Depth Casing Shoe							
TUBING, CASING, AND CONDUHEAD RECORD								
HOLE SIZE	CASING & TUBING SIZE	LOG-TO-SET	SEALS & CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be of minimum of 1 full volume of load oil and must be equal to or exceed any allowable for this well in any 24 hours)

Date First New Oil Run To Tanks	Date of Test	Flowing Method (Flow, pump, gas lift, etc.)	
Length of Test	Flowing Pressure	Casing Pressure	Crack Size
Actual Prod. During Test	Oil-MCF	Water-MCF	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Water-MCF	Gravity of Conduthead
Testing Method (pilot, back-pn)	Flowing Pressure (psig-14.7)	Casing Pressure (psig-14.7)	Crack 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.



Vice President - Engineering

October 1, 1982

(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 19 1982
BY SECRETARY
TITLE SECRETARY

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 certificate of the completion of the well in accordance with section 111.

This form is to be filed in compliance with RULE 1104.

FILED IN BOOKS 1, 11, 111, and 1111 for classification of wells, with name of well, or transporter or other such change of classification.