OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

HIGY AND MINERALS DEPARTMENT	OIL CONSERVA	TION DIVISION	K441260 10-1-18	
par menulion	Р. О. ВО			
BANTAFE	SANTA FE, NEW	/ MEXICO 87501		
7118				
LAND OFFICE	REQUEST FOR	I ALLOWADI E		
THANSPORTER		4D		
OFINATON	AUTHORIZATION TO TRANSF	PORT OIL AND NATURAL GAS		
PHONATION OFFICE				
Century Production, In	c .			
Address				
	Services, Inc. Box 763, I	Hobbs, NM 88240		
Reason(s) for liling (Check proper box)	_	Other (Please explain)		
Now Well	Change in Transporter of: Oil Dry Gas	. [7]		
Change in Ownership X	Casinghead Gas Conden	汽		
Change in Outer Integral				
If change of ownership give name and address of previous owner	Great Basins Petroleum Co	o. P. O. Box 763, Hobbs,	NM 88240	
DESCRIPTION OF WELL AND	FASE Well No. Pool Name, Including Fo	ormation Kind of Leas	Lease No.	
Antebellum Unit	1 Antelope Ridge			
Location Circ	1 micrope kage			
Unit Letter N : 660	Feet From The South Line	• andFeet From	The West	
Line of Section 21 To	mahip 23S Range	34E , NMPM, Le	ea County	
DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S Andress (Give address to which appro	oved copy of this form is to be sent)	
Nome of Authorized Transporter of Cli		P. O. Box 175, Artesia		
Navajo Crude Oil Purchas	ing Company inghead Gas () or Dry Gas (X)	Address (Give address to which appro	oved copy of this form is to be sent)	
Colorado Interstate Gas		P. O. Box 1087, Colorad	do Springs, CO 80944	
If well produces oil or liquids,	Unit , Sec. Twp. Rge.		nen	
give location of tanks.	N 21 238 34E	Yea	8/18/75	
If this production is commingled wit COMPLETION DATA	h that from any other lease or pool, Oil Well Gas Well	give commingling order number: New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Completion		1		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Lievations (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 FO	DR ALLOWABLE (Test must be u) able for this de	psh or be for full 24 hours)	land must be equal to or exceed top allow	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ijt, 210.)	
			Choxe Sire	
Length of Test	Tubing Pressure	Cusing Pressure	,	
Actual Prod. During Test	CII-Bale.	Water-Ebla.	Gda-MCF	
Action Francisco				
GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Actual Prod. Test-MCF/D	Lengin Di 1991			
Teating Method (pirat, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Sixe	
CERTIFICATE OF COMPLIANCE	DE .	OIL CONSERVA	TION DIVISION	
CLIPPIONEE OF COMPENSION		APPROVED OCT 271	982	
I hereby certify that the rules and r	egulations of the Oil Conservation	GAIGINAL SI	GNED B1	
Division have been complied with above is true and complete to the	and that the information given	BYJERRY SE	XION	
		TITLE DISTRICT 1 SUPR.		
		11	compliance with nULE 1104,	
Wound Valles		11	mable for a newly drilled or deepens	
Wound / James	iwe)	well, this form must be accompanied taken on the well in scc.	willed by a trodistion of the deflects.	
Age	n†	the same of the form of	out be filled out completely for allow	

Wonna	Walls	
	(Signature)	
	Agent	
	(Tale)	

(Date)

10/25/82

All sections of this form most be shire on new and recompleted wells.

FIM out only Sections 1, 11, 111, and VI for thences of owner well name or number, or transporter, or other such thange of condition

Separate Young C-104 must be filled for each pool in multiple condition water.

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ľ	FILE			
	U.S.G.5,			
ſ	LAND OFFICE			
1	TRANSPORTER	OIL	l	
		GAS		
Ì	OPERATOR			
Ţ	PRORATION OF			

Agent

11/4/75

(Title)

(Dute)

MEXICO OIL CONSERVATION COMMISSION

Form C-104
Supersedes Old C-104 and C-110

SANTAFE		KEMOE21	FUR ALLUWABL	E	Effective 1-1-6	
FILE U.S.G.S.		AUTHORIZATION TO TR	DNA NA IIO TROBRAN	D NATURAL (245	
LAND OFFICE		AUTHORIZATION TO TR	ANSPORT OIL AR	DINATORAL	343	
LAND WING	OIL			•		
TRANSPORTER	GAS	1				
OPERATOR		1				
PRORATION OFF	ICE					
Operator						
Great Be	sins Petro	leum Company				
Address				W1 0		
		Gas Services, Inc., Box	763, HODDS, M	S COLKON WE	8240	
Reason(s) for filing	Check proper box		Uther (Pi	ease explain)		
New Well	닉	Change in Transporter of:	Terr	ective 11/1	/75	
Recompletion	H	Oil Dry C	ensate X	DO 02.16 (1) 1,	717	
Change in Ownership		Casinghead Gas Cond				
If change of owners	hip give name					
and address of prev						
	- 10FY Y A \$175	Y IC LOIC				
I. DESCRIPTION O	F WELL AND	Well No. Pool Name, Including	Formation	Kind of Leas	e	Leuss No.
Antebellum	Unit	1 Antelope Rid	ge (Morrow)	State, Federa	alor Fee State	L-4333
Location						
Unit Letter	1 6	60 Feet From The South	ine and 1980	Feet From	The West	
Onit Letter					_	
Line of Section	21 το	wnship 23 S Range	34 E , N	мрм,	Lea	County
I. DESIGNATION O	F TRANSPOR	TER OF OIL AND NATURAL O	AS	ess to which appro	oved copy of this form is	to be sent)
Name of Authorized			1			,
Navajo Cru	le 011 Puro	hasing Company usinghead Gas or Dry Ga	Address (Give addr	ess to which appro	w Mexico 88210 oved copy of this form is	to be sent)
Name of Authorized Colorado I			1		orado 80201	
		Unit Sec. Twp. Pge.	Is gas actually con		nen	
If well produces oil give location of tank		N 21 238 34E	Yes		8/18/75	
1 ·		<u></u>		order number:		
		ith that from any other lease or poo	i, give comminging c	nder number.		
v. COMPLETION D		Oil Well Gas Well	New Well Worko	ver Deepen	Plug Back Same Re	stv. Diii. Restv
Designate Ty	pe of Completi	on - (X)	1 1	I		<u> </u>
Date Spudded		Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	
						The second secon
Elevations (DF, RK	B, RT, GR, etc.;	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth	
					Depth Casing Shoe	
Perforations						
		TUDING, CASING, A	NO CENENTING RE	CORD		arranon, professor and a galaxy grade Albayer grade (Albayer grade) and the comment of the same and the same a
		CASING & TUBING SIZE		H SET	SACKS CE	MENT
HOLE	SIZE	CASING & TODING SIZE				
						Andrews or the second residence of the second secon
V. TEST DATA AN	D REQUEST I	FOR ALLOWABLE (Test must be	e after recovery of total	volume of load of	l and must be equal to or	exceed top allos
OIL WELL	D 112 (Calcar -	able for this	depth or be for full 24	hours)		AND THE PARTY OF THE PARTY OF THE PARTY.
Date First New Oil	Run To Tanks	Date of Test	Producing Method	Triow, pump, gas	ajt, etc.)	
			Casing Pressure		Choke Size	
Length of Test		Tubing Pressure	Caping Plassas			
		Oil-Bbls.	Water - Eible.		Gas-MCF	The second secon
Actual Prod. During	[Test	Ott-Beie.	., _, _,			
				,		and the second s
MAG WEST F						and the second s
GAS WELL Actual Prod. Test.	MCF/D	Length of Test	Bbls. Condensate/	MMCF	Gravity of Condensa	l e
Actual Float 144.						and the second s
Testing Method (pi	tot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Sixe	
	- /					rangan yan sake ili kiloro ili da Kalifono . Bir Villa Sakeballa sayanar
VI. CERTIFICATE	OF COMPLIA'	VCE	0	IL CONSERV	ATION COMMISSION	NC
All CEMILLIONS	02 00,012 22404.			NOV 5	1975	. 19
I horeby certify th	ast the rules and	regulations of the Oil Conservati	on APPROVED_	14174	2 12	. 127 minutes recommendent
A Colon Income	Lean appointed	with and that the interestion siv	C11 11 / -	muste	No	and the state of t
above is true and	I complete to the	he best of my knowledge and believe	1			
			TITLESTIBLE	- HVICOR	DISTRICT	ederlina andre renga — gaminapere pina real transportario, displanta en
11	,	1 12	This form	is to be filed in	compliance with RU	LE 1104.
116	21216	alles	11		ownble for a newly del	that or deepens
	(Sig	inature)	II . 45 Alila Engin	, much ha second	panied by a tebulation tordence with AULE 1	CA CHAIN COMPANIES

If this is a request for allowable for a newly drillic or despended well, this ferm must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.

All sections of this form must be littled out committely for silow-shie on new and recompleted wells.

Fill out only factions I. H. Hi, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

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10/2/75

OR OFFICE	Allete swif A Heart for the		HATURAL GAS	
Great Basins Per	troleum Company			
c/o Oil Reports	& Gas Services, Inc., Box	763, Hobbs, New	Mexico 88240	
ascn(s) for filing (Check prop	er haz j	رئين رئي ان سندون ان	ac explain)	
Recommettion	Call Till	Please below.	note correction of ho	le size
be change of ownership give na and address of previous owner	To delete American Fue	Ls Corporation f	rom Operating Name.	
W. DESCRIPTION OF WELL :	AND LEASE		Zind of Lease	
Antebellum Unit	•		State, Federal or Feestate	Lease No. L-4333
Locati :	660 Prose with	1980	ficat From The West	
	Township 28 8 Heact			Country
			yea	County
Name of Authorized Transporter	PORTER LP (AL GAD NA realis) of OH []		to which approved copy of this form	is to be sent)
Name of Authorized Transporter	of Casinghead Gas [] a 22,700	en e	which approved copy of i is form	is to be sent)
Colorado Interst	ate Gas Company	P. O. Box 749	, Denver, Colorado 802	01
If well produces all or liquids, give location of tanks.		Yes	8/18/75	
If this production is commingle	ed with that fall any simulation is a given		• •	
IV. COMPLETION DATA Designate type of Comp	i Well (Con e)	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Despen Plug Eack Same !	Res'v. Diff. Res'v.
Date Spudded	Date Com, 1. Boods to Prost.	A the conjugate	P.B.7.D.	
Elevations (DF, -(KB, RT, GR, e	Name of Pullstany Younglies.	1	Tubing Depth	
Perforations			Depth Coming Sho	-
The second secon	Trabalas (Saita 1)			
	rubing, cathig 41 Casing a rubing size			
		* *	* * * * * * * * * * * * * * * * * * *	
17 1/2 12 1/4			The second secon	
8 1/2				
	T FOR ALLOWALL By particular to		Care Care	
OIL WELL Date First New Oil Run To Tank	Date of Year		. jak silij	
Length of Test	Tubing Press to		oue. Les 1€	
Actual Prod. During Test	Ott-Bele-	± "	at Att	
				Adappendentials for the analysis of the section of
GAS WELL Actual Prod. Test MCF/D	Length of four	i waa aa	F Gravity f Condense	Tie.
Testing Method (pitat, back pr.)	Tubing Preserve (dame or	- Committee of the comm		
	and the same of th		CALCADA CALLADA	
VI. CERTIFICATE OF COMPL	IANCE		HISERVATION COMMISSI	Oin
I hereby certify that the rules	and regulations of the Soft of house and a			., 19
Commission have been complete to above is true and complete to	ied with and that the indimation gives to the best of my knowledge and walls.	- 1) <u></u>	ale New Ar	
			Geologist	
11/2 11	16-		the filed in compliance with RU	
16 to 2016 /16	(LUI (Signature)	il il rinta torra tatta	and for allowable for a newly drive to be accompanied by a tabulation	of the deviation
	Agent	il sirl and thouse Of	well in accordance with RULE this form must be filled out com	
	(Title)	gate out new and re	completed wells.	,

will that only Sections I, II, III, and VI for changes of owner,