

NO. OF COPIES RECEIVED		NEW MEXICO OIL CONSERVATION COMMISSION		Form C-104	
DISTRIBUTION		REQUEST FOR ALLOWABLE		Superseding Old C-104 and C-1	
SALE AREA		AND		Effective 1-1-65	
FILE		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
U.S.G.S.					
LAND OFFICE					
TRANSPORTER		OIL GAS			
OPERATOR					
PRORATION OFFICE					
Operator Doyle Hartman					
Address Post Office Box 10426 Midland, Texas 79702					
Reason(s) for filing (Check proper box)				Other (Please explain)	
New Well		<input type="checkbox"/>		Change in Transporter of:	
Recompletion		<input type="checkbox"/>		Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership		<input checked="" type="checkbox"/>		Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of ownership give name and address of previous owner Sun Exploration & Production Co. P. O. Box 1861 Midland, TX 79702					
DESCRIPTION OF WELL AND LEASE					
Lease Name Meyers "B"		Well No. 2		Pool Name, including formation Jalmat (Gas) Yates-7 Rivers	
				Kind of Lease State, Federal or Fee Federal	
				Lease No. LC-054665 (B)	
Location Unit Letter H ; 1980 Feet From The North Line and 660 Feet From The East					
Line of Section 11 Township 24S Range 36E , NMPL, Lea County					
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>				Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>				Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company				P. O. Box 1492 El Paso, Texas 79978	
If well produces oil or liquids, give location of tanks.		Unit	Sec.	Twp.	Rge.
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
Date Spudded		Date Compl. Ready to Prod.		Total Depth	
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation		Top Oil/Gas Pay	
Perforations				Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET	
TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load 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 Tanks		Date of Test		Producing Method (Flow, pump, gas lift, etc.)	
Length of Test		Tubing Pressure		Casing Pressure	
Actual Prod. During Test		Oil-Bbls.		Water-Bbls.	
GAS WELL					
Actual Prod. Test-MCF/D		Length of Test		Bbls. Condensate/MMCF	
Testing Method (pilot, back pr.)		Tubing Pressure (shut-in)		Casing Pressure (shut-in)	
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.					
Larry G. Newmyer (Signature) Engineer (Title) January 22, 1986 (Date)					
OIL CONSERVATION COMMISSION					
APPROVED MAR 20 1986 19					
BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR					
TITLE					
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 deviate 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 changes of owner, well name or number, or transporter or other such change of condition.					

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