

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

OIL CONSERVATION DIVISION

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Baxter, Kelly H.		Well API No. 3002522337
Address P. O. Box 11193, Midland, TX 79702		
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)		
New Well ☐	Change in Transporter of: Oil ☒ Dry Gas ☐	
Recompletion ☐	Casinghead Gas ☐ Condensate ☐	
Change in Operator ☐		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name E.C. Hill "B"	Well No. 2	Pool Name, including Formation Teague Blinebry	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
Location Unit Letter <u>N</u> : <u>990</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>West</u> Line Section <u>27</u> Township <u>23</u> Range <u>37</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate EOTT Energy Co. <u>ET Pipeline Co.</u>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4666, Houston, TX 77210
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Sid Richardson Carbon & Gasoline Co.	Address (Give address to which approved copy of this form is to be sent) 201 Main Street, Fort Worth, TX 76102
If well produces oil or liquids, give location of tanks. Unit <u>N</u> Sec. <u>27</u> Twp. <u>23</u> Rge. <u>37</u>	Is gas actually connected? <u>Yes</u> When? <u>Unknown</u>

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 ☒	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res v	Diff Res v
Date Spudded 11/20/67	Date Compl. Ready to Prod. 1/4/68		Total Depth 6355		P.B.T.D. 5888			
Elevations (DF, RKB, RT, GR, etc.) 3294.4	Name of Producing Formation Blinebry		Top Oil/Gas Pay 5308		Tubing Depth 5590			
Perforations 5365-5462; 5504-5612; 5732-5866					Depth Casing Shoe 6355			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	9 5/8	1066	450 circ
8 3/4	7	6355	550
	2 3/8	5590	

V. 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 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/MMCF	Gravity of Condensate
Testing Method (prior, back pr)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. 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.

L. Johnston
Signature L. Johnston Agent
Printed Name
Date 11/9/93 (915) 682-5492 Title
Telephone No.

OIL CONSERVATION DIVISION

NOV 17 1993

Date Approved _____
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.