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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

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. 3002522909 ✓
Address P. O. Box 11193, Midland, TX 79702	
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)	
New Well ☐	Change in Transporter of: ☐ Operator Change Effective 12/1/92
Recompletion ☐	Oil ☐ Dry Gas ☐ Well is T.A.
Change in Operator ☒	Casinghead Gas ☐ Condensate ☐
If change of operator give name and address of previous operator Argee Oil Company, 401 W. Texas, Suite 810, Midland, TX 79701	

II. DESCRIPTION OF WELL AND LEASE

Lease Name E. C. Hill "A"	Well No. 4	Pool Name, including Formation Imperial Tubb Drinkard	Kind of Lease (State, Federal or Fee) State	Lease No.
Location				
Unit Letter J	2310	Feet From The South	Line and 2310	Feet From The East
Section 27	Township 23-S	Range 37-E	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)					
Shell Pipeline Company	P. O. Box 2648, Houston, TX 77001					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
Sid Richardson Carbon & Gasoline Co.	201 Main Street, Fort Worth, TX 76102					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 27	Twp. 23	Rge. 37	Is gas actually connected? No	When?

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 1/17/69	Date Compl. Ready to Prod. 3/25/69	Total Depth 7065	P.B.T.D. 6500					
Elevations (DF, RKB, RT, GR, etc.) 3282.9	Name of Producing Formation Drinkard	Top Oil/Gas Pay 5994	Tubing Depth 6077					
Perforations 5994-6231; 6403-6489			Depth Casing Shoe					

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2	9 5/8	865	400
8 7/8	7	7069	650
	2 3/8	6077	

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 (pilot, 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 1/15/93 (915) 682-5492
Telephone No.

OIL CONSERVATION DIVISION

FEB 01 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.