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

Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.	T	OTRA	NSF	PORT O	L AND NA	TURAL	.GA					
Operator Velton Operating Corporation									Well API No.			
Kelton Operating Corporation Address									₩ 3e-025-23170			
Post Office Box 3090 Roswell, New Mexico 88202-3090												
Reason(s) for Filing (Check proper box)			_	_	Oth	er (Please	explai	n)				
New Well		Change in			Effect	tive						
Recompletion Change in Operator XX	Oil Casinghead	_	Dry C	ensate		ry 14,	1992					
					Office	Box 79	6. N	lonahan	s. Texas	79756		
			,				· ·					
II. DESCRIPTION OF WELL A									of Lease	 -		
Lease Name Well No. Pool Name, Includi											ease No.	
Location	iorth	orth 660				East						
Unit LetterH	: 1980 Feet From The No				Lin	Line and Fe			et From TheLine			
Section 11 Township	23 S	;	Range	e 37E	, N	МРМ,	L€	:a		·· · · · · · · · · · · · · · · · · · ·	County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil												
Name of Authorized Transporter of Oil		Address (Give address to which approved copy of this form is to be sent)										
Navajo Refining Name of Authorized Transporter of Casing		P.O. Box 159, Artesia, NM 88210 Address (Give address to which approved copy of this form is to be sent)										
Name of Authorized Transporter of Casinghead Gas XX or Dry Gas Texaco Exploration and Production					P.O. Box 1650 Tulsa, Ol				• • • •			
If well produces oil or liquids, Unit Sec.			Twp.	Rge	Is gas actually connected?			<u>;</u>	When ?			
give location of tanks.	Н	11	23	37	Yes				NA			
If this production is commingled with that f	rom any othe	r lease or p	pool, g	ive commin	gling order num	ber:						
IV. COMPLETION DATA		Oil Well	 -	Gas Well	New Well	Workov	er l	Deepen	Plue Back	Same Res'v	Diff Res'v	
Designate Type of Completion -	· (X)		i			1	ij	Doopse				
Date Spudded	Date Compl. Ready to Prod.			Total Depth	Total Depth				P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas	Top Oil/Gas Pay				Tubing Depth		
					<u> </u>							
Perforations					Depth Casin	g Shoe						
	<u> </u>	IRING	CAS	ING AND	CEMENTI	NG REC	'ORT	<u> </u>	<u> </u>	······································		
HOLE SIZE	TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE					DEPTH SET				SACKS CEMENT		
V. TEST DATA AND REQUES	T FOR A	LLOWA	RIF	7	1				<u> </u>			
OIL WELL (Test must be after re					St be equal to o	exceed to	p allor	vable for thi	s depih or be	for full 24 hou	urs.)	
Date First New Oil Run To Tank	Date of Test				Producing M						·····	
									7	Challe Cia		
Length of Test	Tubing Pressure				Casing Pressure				Choke Size	Choke Size		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls	Woter - Rhie				Gas- MCF		
Actual Flor. During Test	Oil - Bois.				Tratez - Bota							
GAS WELL												
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF				Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Press	Casing Pressure (Shut-in)			Choke Size				
VI OPERATOR CERTIFIC	ATE OF	COMP	ΙΙΔ	NCF		7			<u> </u>			
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation						OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above						JAN 2 2 92						
is true and complete to the best of my knowledge and belief.					Date	Date Approved						
CIRCARON												
Signature						By Oxegota at the first santer						
C. Dale Kelton President									3 O.			
Printed Name Title I anuary 14, 1992 505-622-2421											·	
January 14, 1992 Date			2-24 phone								· · · · · · · · · · · · · · · · · · · 	
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. 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
- 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.