NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO

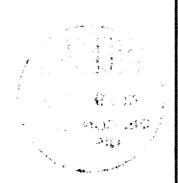
Form C-110 Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Well No. 13-14 Unit Letter L s 14 T 25N R 12W Pool Bisti-Gallup County San Juan Kind of Lease (BESSEX), Fed. SOCCOMMENT If well produces oil or condensate, give location of tanks: Unit P s 13 T 25N R 12W Authorized Transporter of Oil or Condensate Four Corners Pipe Line Address P. O. Box 1095, Compton, California (Give address to which approved copy of this form is to be sent) Authorized Transporter of Gas F1 Paso Natural Gas Co. Address Famington, New Mexico (Give address to which approved copy of this form is to be sent) If Gas is not being sold, give reasons and also explain its present disposition: Reasons for Filing: (Please check proper box) New Well (x) Change in Ownership () Other Co. Well Carson Unit 23-14 Co. Well Carson Unit 23-14 Doriginal signed by By By Shepard By Shepard	Company or Operator Shell Oil Compa	ny Lease C
If well produces oil or condensate, give location of tanks: Unit P S 13 T 25N R 12W Authorized Transporter of Oil or Condensate Four Corners Pipe Line Address P. O. Box 1095, Compton, California (Give address to which approved copy of this form is to be sent) Authorized Transporter of Gas El Paso Natural Gas Co. Address Farmington, New Mexico Date Connected 10-30-59 (Give address to which approved copy of this form is to be sent) If Gas is not being sold, give reasons and also explain its present disposition: Reasons for Filing: (Please check proper box) New Well (x) Change in Transporter of (Check One): Oil (x) Dry Gas () C'head () Condensate () Change in Ownership () Other (Give explaint) below) Remarks: Co. Well Carson Unit 23-14 NOV 9 1959 OIL CON. COT NOV 9 1959 OIL CON. COT By By By By Shepard	Well No. 13-14 Unit Letter L S 14	T 25N R 12W Pool Bisti-Gallup
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Authorized Transporter of Oil or Condensate Four Corners Pipe Line Address P. O. Box 1095, Compton, California Give address to which approved copy of this form is to be sent) Authorized Transporter of Gas El Paso Natural Gas Co. Address Farmington, New Mexico Date Connected 10-30-59 (Give address to which approved copy of this form is to be sent) If Gas is not being sold, give reasons and also explain its present disposition: Reasons for Filing: (Please check proper box) New Well (x) Change in Transporter of (Check One): Oil (x) Dry Gas () C'head () Condensate () Change in Ownership () Other (Give explantion below) Co. Well Carson Unit 23-14 NOV 9 1959 OIL CON. COF The undersigned certifies that the Rules and Regulations of the Oil Condensation Commission have been complied with. Executed this the day of 19 By By Shepard	If well produces oil or condensate, give lo	ocation of tanks: Unit P S 13 T 25N R 12W
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Co. Well Carson Unit 23-14 Co. Well Carson Unit 23-14 NOV 9 1959 OIL CON. Correspond to the Oil Conservation Commission have been complied with. Executed this the	Change in Ownership	l) Other
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By B. W. SHEPARD B. W. Shepard	The undersigned certifies that the Rules as mission have been complied with.	5107
By B. W. SHEPARD HOV 0 1959 B. W. Shepard	Executed this theday of	19
B. W. Shepard		Original signed by B. W. SHEPARD
Approved 19 Title Exploitation Engineer	ApprovedNOV 9 1959 19	B. W. Shepard
OIL CONSERVATION COMMISSION Company Shell Oil Company	OIL CONSERVATION COMMISSION	
By Cream Signed Enery C. Arnold Address Box 158	Ly Chamel Signed Enery C. Arnold	
Fittle Supervisor Dist. # 3 Farmington. New Mexico	, <u>,</u>	ACCUESS BOX UM





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NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

(Form C-104) Revised 7/1/57

New Well

REQUEST FOR (OIL) - (GAS) ALLOWABLE

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is deliv-

ered into th	e stock tan	ks. Gas mu	ist be reported on 15.025 psia at 60° Fahrenheit.
			Farmington, New Mexico 11-3-59 (Place) (Date)
WE ARE H	EREBY R	.EQUESTI	ING AN ALLOWABLE FOR A WELL KNOWN AS:
Shell (Cor	O11 Comp	any erator)	Carson Unit , Well No. 13-14 , in NW 1/4 SW 1/4 (Lease)
Unit Let	ter		T 25 N , R 12 W , NMPM., Bisti - Gallup Poo
San Jua	an	· · · · · · · · • • • • • • • • · · · ·	County. Date Spudded. 10-1-59 Date Drilling Completed 10-6-59
Pleas	e indicate l	location:	Elevation KB 6272.7 Total Depth 4893 PBTD
D (СВ	A	Top Oil/Gas Pay 4731 Name of Prod. Form. Gallup PRODUCING INTERVAL -
			Perforations 4731-55, 4768-86, 4791-4808, 4816-26, 4833-47
E 1	F G	H	Perforations 4731-55, 4768-86, 4791-4808, 4816-26, 4833-47 Open Hole - Casing Shoe 4890 Depth Tubing 4745
L 1	K J	I	OIL WELL TEST - Choke
X			Natural Prod. Test: bbls.oil, bbls water in hrs, min. Size Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of
M	N O	P	Choke 2 th load oil used): 65 bbls.oil, 1 bbls water in 24 hrs, min. Size 2 th
	l		GAS WELL TEST -
Co. Well	l Carson	Unit 23	Natural Prod. Test: MCF/Day; Hours flowed Choke Size
Tubing ,Casi	ing and Cem	enting Recor	Method of Testing (pitot, back pressure, etc.):
Size	Feet	Sax	Test After Acid or Fracture Treatment: MCF/Day; Hours flowed
			Choke Size Method of Testing:
13-3/8"	28	115	office of the color of the color
8-5/8"	105	100	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and
4-1/2"	489 0	150	sand): 200 gal. mud acid, sand oil fracture 50,000 gal. crude 1#/ Casing Tubing Date first new oil run to tanks 10-30-59 S
2-3/8"	4 74 5	_	Oil Transporter Four Corners Pipe Line
		<u> </u>	Gas Transporter El Paso Natural Gas Co.
Remarks:		••••	/RELEIVED
		••••••	NCV.9 1959
I hereby	v certify th	at the info	ormation given above is true and complete to the best of my know of the CON.
Approved		BUY 5 i	19 Shell Oil Company DIST
••			Original almed by
OII	L CONSE	RVATION	COMMISSION By:B.WSHEPARD(Signature)
y: Origin	nal Sign	ed Emer	ry C. Arnold Exploitation Engineer
,			Send Communications regarding well to:
itle	Supe	rvisor Dist.	Name Shell Oil Company
			Address Box 158, Farmington, N. M.

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