

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	
UNIT	

Beta Development Company

Address

238 Petroleum Plaza, Farmington, NM 87401

Reason(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

RECEIVED

FEB 01 1985

OIL CON. DIV
DIST 2If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lessee Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Holloway Federal	3-E	Basin Dakota	State, Federal or Fee Federal	
Location				
Unit Letter	I	1850 Feet From The South Line and 1190 Feet From The East		
Line of Section	6	Township 27N	Range 11W	NMPM, San Juan County

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)
Permian Corporation	P. O. Box 1183 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)
El Paso Natural Gas Co.	P. O. Box 990 Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
I 6 27N 11W	Yes 1-25-85

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	Deepen	Plug Back	Same Restv.	Diff. Restv.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
12-27-83	6-15-84	6575	6506					
Elevations (DF, AKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
6062 GR	Dakota	6336	6413					
Perforations	6336-50, 6358-70, 6378-90, 6394-98 6412-38, 6454-58, 6462-65, 6480-86		Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2"	8-5/8"	318	220 sx Class B 2 1/2" ca. cl
7-7/8"	4 1/2"	6575	Cemented 3 stage #1 350 sx 50-50 posmix
	2-1/16"	6413	#2 300 sx 65-35 posmix
			#3 400 sx 65-35 posmix

TEST DATA AND REQUEST FOR ALLOWABLE
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	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
1107	3 hr	4	58
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Back pressure	885	905	3/4"

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.

D. E. Bayte

(Signature)

Superintendent

(Title)

January 28, 1985

(Date)

2-1-85 OIL CONSERVATION DIVISION

FEB 01 1985

APPROVED

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

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 deviation 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.