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BANTA FE FILE U.S.G.S.

LAND OFFICE

DISTRIBUTION

TRANSPORTER DIL

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OPERATOR PROBATION OFFICE	AUTHORIZATION TO TRANSPO	ORT OIL AND NATURAL GAS	
Operator			
Pioneer Production Corp.  Address			
Box 208, Farmington, NM 87499  Reason(s) for filing (Check proper box)  Other (Please explain)			
New Well	Change in Transporter of:		
Recompletion  Change in Ownership	Oil Dry Gas Casinghead Gas Condens	ate X July 1, 1983	•
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND LEASE    Verification   Ver			
Maddox GAS COM	2 Basin Dakot	State, Federal	orFee Federal NM-021112
Unit Letter L : 2030	Feet From The South Line	and 1075 Feet From T	heWest
Line of Section 33 Township 30N Range 12W , NMPM, San Juan County			
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Or Condensate [X]  Address (Give address to which approved copy of this form is to be sent)			
Name of Authorized Transporter of Oil	or Condensate XX		
Giant Refining, Inc. Name of Authorized Transporter of Cas	inghead Gas Or Dry Gas XX	Box 338 Bloomfield ! Address (Give address to which approv	
El Paso Natural Gas Co	mpany Unit Sec. Twp. Rge.	Box 990, Farmington, I ls gas actually connected? Whe	
If well produces oil or liquids, give location of tanks.	L 33 30N 12W	Yes	
If this production is commingled wit	h that from any other lease or pool, a	give commingling order number:	7534
Designate Type of Completion	n - (X) Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
TI W (DE DED DE CD	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)			Depth Casing Shoe
Perforations			Deptili Guality and
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST FOR ALLOWABLE (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)			
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)
		Casing Pressure	Choke Size
Length of Test	Tubing Pressure		
Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	Gas • MCF
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIAN	•	OIL CONSERVA  APPROVED JUN 21	
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.		Original Signed by FRANK T. CHAVET	
		SUPERVISOR CHARGE # 3	
		TITLE This form is to be filed in compliance with RULE 1104.	
J. A. WUAR		I	
(Signature)		well, this form must be accompanied by a tabulation of the desire taken on the well in accordance with RULE its.	
Agent		All sections of this form must be filled out completely for alloable on new and recompleted wells.	
June 20, 1983  Fill out only Sections I. II. III. and VI for changes of well name or number, or transporter, or other such change of contract of the such change of t			II. III. and VI for changes of owner ter, or other such change of condition
(Date)			