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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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Shell Western E&P Inc.	Well API No. 30-025-23130 ✓
Address P.O. Box 576 Houston, TX 77001-0576 (WCK 4465)	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator Cancel Hobbs Paddock	

II. DESCRIPTION OF WELL AND LEASE

Lease Name SHELL A STATE	Well No. 7	Pool Name, Including Formation HOBBS - LOWER BLINEBRY	Kind of Lease State, Federal or Fee STATE	Lease No. A-1118
Location Unit Letter H : 1930 Feet From The NORTH Line and 660 Feet From The EAST Line Section 32 Township 18S Range 38E, NMPM, LEA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> SHELL PIPELINE CORP.	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1910, MIDLAND, TX 79702-1910					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS-PETROLEUM COMPANY GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) 4044 PENBROOK, ODESSA, TX 79762					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 32	Twp. 18S	Rge. 38E	Is gas actually connected? YES	When? 3/08/93

If this production is commingled with that from any other lease or pool, give commingling order number:

TEMP. AUTHORITY GRANTED 7/28/92

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well	Workover	Deepen X	Plug Back	Same Res'v	Diff Res'v X
Date Spudded 6/14/69	Date Compl. Ready to Prod. 3/08/93		Total Depth 7020'		P.B.T.D. 6575'			
Elevations (DF, RKB, RT, GR, etc.) 3646' DF	Name of Producing Formation LOWER BLINEBRY		Top Oil/Gas Pay 6202'		Tubing Depth 6151'			
Perforations 6205-60' (2 SPF)					Depth Casing Shoe 7015'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2 IN.	13-3/8 IN.		350'		350			
12-1/4 IN.	8-5/8 IN.		3790'		1300			
7-7/8 IN.	5-1/2 IN.		7020'		650			
	2-3/8 IN. TBG		6151'					

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 3/05/93	Date of Test 4/07/93	Producing Method (Flow, pump, gas lift, etc.) FLW'G	
Length of Test 4/07/93	Tubing Pressure 30	Casing Pressure 0	Choke Size FULL
Actual Prod. During Test	Oil - Bbls. 3	Water - Bbls. 0	Gas- MCF 300

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.

Signature J. L. Morris
Printed Name J. L. MORRIS
Date 4/08/93
Title TECH. MGR. - ASSET ADMIN.
Telephone No. 713/870-3797

OIL CONSERVATION DIVISION

Date Approved APR 16 1993

By Paul Kanta
Title Geologist

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.