STATE OF NEW MEXICO	_				
ENCRGY AND MINICIPALS DEPARTMEN					
CHITAIRUTION	OIL CONSE				
14414/4	P. Santa Fe,				
V 1. U. 1.	SKIVIN FE				
LAND DEFICE					
TRANSPORTED VIC	REQUES				
CTTATOR					
1. PRODATION OFFICE	AUTHORIZATION TO T				
Chetatat					
Shell Western E&P, Inc.					
<u> </u>	Address				
200 North	Dairy Ashford, P.O. Box				
Reason(s) for filing (Check proper)	01)				
New Well	Change in Transporter of:				
Ascompletion (X)	011				
Change In Ownership X	Casinghead Gas				
If change of ownership give name					
and address of previous owner	Shell Oil Company,				
I DESCRIPTION OF WATER					
Lease Name	Well No.   Pool Name, Includ				
State D					
Location	2 Eunice Monu				
Unit Letter I . 19	80 Feel From The South				
:	80 Feet From The South				
Line of Section 19	mahin 19S.				
	. anshin 422' a				
	mship 195' Range				
L <u>DESIGNATION OF TRANSPO</u>	RTER OF OU AND NATIONAL				
I. DESIGNATION OF TRANSPOR	RTER OF OU AND NATIONAL				
Shell Peneline	RTER OF OIL AND NATURAL  or Condensate   Corp.				
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Shell Peline Name of Authorized fransporter of C Warren Petroleum Corpo If well produces off or liquids.	RTER OF OIL AND NATURAL  OF CONCERNATE  OF CONCERNA				
Shell Pepeline Name of Authorized Transporter of C Warren Petroleum Corpo If well produces all or liquids, give location of tanks.	RTER OF OIL AND NATURAL  or Condensate  or Condensate  or Dry Gas  ration  Unit Sec. Twp. Ree  No Change:				
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Shell Pepeline  Naze of Authorized Transporter of C  Warren Petroleum Corpo  If well produces off or liquids, give location of tanks.  If this production is commingled w  COMPLETION DATA  Designate Type of Completi  Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  MOLE SIZE  TEST DATA AND REQUEST FOOL WELL  Date First New Off Run To Tanks	RTER OF OIL AND NATURAL  OF OIL AND NATURAL  OF OF OIL AND NATURAL  OF OF OIL AND NATURAL  OF OIL WELL  OF OI				
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## RVATION DIVISION O. BOX 2008 NEW MEXICO 87501

	U 8.U.8.	-•				
	TRANSPORTER OIL REQUEST FOR ALLOWABLE					
	<b>;</b>					
	Shell West	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  Shell Western E&P, Inc.				
	Address		001" Househow T 7700			
	heason(s) for filing (Check proper	200 North Dairy Ashford, P.O. Box 991. Houston, Texas 77001				
	New Wolf Change in Transparter of:  Recompletion					
	Change in Ownership	Casinghead Cas Ca	ondensale	· ·		
	Shell Oil Company, P.O. Box 991, Houston, Texas 77001					
1	II. DESCRIPTION OF WELL AND LEASE  Lease Name   Well No.   Pool Name, Including Formation   Kind of Lease   Well No.   Pool Name, Including Formation   Kind of Lease   Well No.   Pool Name, Including Formation   Kind of Lease   Well No.   Pool Name, Including Formation   Kind of Lease   Well No.   Pool Name, Including Formation   Kind of Lease   Well No.   Pool Name, Including Formation   Well Name, Including Forma					
	State D	2 Eunice Monum	cont (C CA)	eral or Foo State		
	.1	180 Feet From The South	Line and (660 Feet Fro	The Egst		
•	Line of Section 19	T. mahip 195. Range	37E NMPM Lea			
<u> </u>	. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL		Count		
	C// O: Maisporter er	or Condensate	Address (Give address to which app	roved spay of this form is to be seen		
Kane of Authorized Transporter of Casinghead C		asinghead Gas (X) of Dry Gas	P.O. BOX 1910 M Address (Give address to which app	raved convolished from in and		
	Warren Petroleum Corpo	Unit Sec. Twp. Rge.	P.U. BOX 1089, LOVING	con, NM 88260		
	cive location of tents.	No Change	Yes	NA .		
•••	If this production is commingled a COMPLETION DATA	with that from any other lease or poo	ol, give commingling order number			
	Designate Type of Complet	ion - (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'y. Diff. Res		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Productor Formation				
	Perforations		Top OIL/Gas Pay	Tubing Depth		
	, , , , , , , , , , , , , , , , , , , ,			Depth Casing Shoe		
:	HOLE SIZE	TUBING, CASING, A	ND CEMENTING RECORD	EMENTING RECORD		
	HOCE 3122	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
v.	TEST DATA AND REQUEST F	OR ALLOWABLE . (Test must be able for this d	efter recovery of total valume of load oil lepth or be for full 24 hours	and must be equal to or exceed top allo		
	ate First New Oil Run To Tanks   Date of Test		Producing Method (Flow, pump, ges lift, etc.)			
İ	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
- 1	Actual Prod. During Test	Oil-Bhis.				
Į	·		Water-Bhis.	Ges-MCF		
	gas well					
	Astual Prod. Test-MCF/D	Length of Test	Bbis. Condensate//MCF	Gravity of Condensate		
-[	eesing Method (pilat, back pr.)	Tubing Pressure (Shat-ia)	Cooling Pressure (Shat-10)	Choke Size		
-1. C	ERTIFICATE OF COMPLIANC	E	Oli CONSERVATION OF THE			
	I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  (Signature)  Attorney-in-Fact		OIL CONSERVATION DIVISION  APPROVED JAN 3 0 1984			
4.			ORIGINAL SIGNED BY JERRY SEXTON  TITLE DISTRICT I SUPERVISOR			
-						
			This form is to be filed in compliance with RULE 1104.			
			If this is a request for silowable for a newly drilled or despens well, this form must be accompanied by a jabolation of the deviation tests taken on the well in accordance with NULE 111.			
	(?inte		All sections of this form must be filled out completely for allow shis on new and recompleted wells.			
_	December 1, 1983 Effec	cive January 1, 1984	Fill out only Sections 1 II III and 10 for change of auto-			

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 Separate Forms C-104 must be filed for each pool in multiple completed wells.

RECEIVED

1998 - Park Burgara, kan geographys i selesioner och

JAN 19 1984

O.C.D. HOBBS OFFICE