

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Shell Oil Company
Address
P. O. Box 1509 - Midland, Texas 79701
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name **Cooper B** Well No. **2Y** Pool Name, including Formation **Eunice-Monument (G-SA)** Kind of Lease **Fee** Lease No.
Location
Unit Letter **D** ; **990** Feet From The **North** Line and **660** Feet From The **West**
Line of Section **4** Township **20-S** Range **37-E** , NMPM, **Lea** County

III. 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)
Shell Pipe Line Corp **P. O. Box 2648, Houston, Texas 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)
Warren Petroleum Corp **Box 67, Monument, New Mexico 88265**
If well produces oil or liquids, give location of tanks. Unit **D** Sec. **4** Twp. **20-S** Rge. **37-E** Is gas actually connected? **Yes** When **5-15-72**

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 4-4-72	Date Compl. Ready to Prod. 5-15-72	Total Depth 3831	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3571 DF	Name of Producing Formation Grayburg	Top Oil/Gas Pay 3725	Tubing Depth 3827					
Perforations Open Hole 3725-3831			Depth Casing Shoe 3725					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		335'		200 sx			
7-7/8"	5-1/2"		3725'		100 sx			

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 Tanks 5-15-72	Date of Test 5-18-72	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 43	Water - Bbls. 7	Gas - MCF 87

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. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

J. R. Farina
(Signature)
J. R. Farina, Senior Production Engineer
(Title)
5-18-72
(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAY 22 1972**, 19
BY **[Signature]**
TITLE **SUPERVISOR DISTRICT I**

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.

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

STEF S S YAM

1972

RECEIVED

MAY 22 1972

OIL CONSERVATION COMM.
HOBBS, N. M.