

OIL CONSERVATION DIVISION
P. O. BOX 2000
SANTA FE, NEW MEXICO 87501

DATE OF RECEIPT	
DISTRIBUTION	
SANTA FE	
ALBUQUERQUE	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Alpha Twenty-One Production Company

Address

P. O. Box 1206, Jal, NM 88252

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input checked="" type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input checked="" type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.				
Toni	1	Nadine Drinkard	State, Federal or Fee Fee					
Location	Unit Letter <u>H</u> ; 1980 Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u>							
Line of Section	22	Township	19-S	Range	38-E	NMPM	Lea	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Navajo Refining Company	P. O. Box 175, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips Petroleum Company	P. O. Box 19, Bartlesville, OK 74189					
Does well produce oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually connected?	When
	H	22	19-S	38-E	Yes	December 17, 1982

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					X		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
8-30-81	7-3-82	8000	7470					
Production (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3604 GL	Drinkard	6714	7021					
Perforations	6714, 18, 20, 36, 42, 72, 74, 76, 78, 86, 96, 6906, 08, 27, 34, 43, 44, 56, 60, 74, 84, 89, 7002, 7006, 7008		Depth Casing Shoe					
			8000					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	30'	Redimix to surface
17-1/2"	13-3/8"	358'	375 sxs
12-1/4"	8-5/8"	3237'	1150 sxs
7-7/8"	5-1/2"	8000.60'	1st 700 sx POZ

TEST DATA AND REQUEST FOR ALLOWABLE
NEW 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.)	
7-5-82	10-25-82	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	Pump	10	48/64
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
7	5	2	112

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Casing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.

Steve J. Mobernik
(Signature)

Technical Advisor

(Title)

1-10-83

(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 17 1983, 19

BY ORIGINAL SIGNED BY

JERRY SEXTON

TITLE DISTRICT 1 SUPR

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 conditions.

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

RECORDED

JAN 17 1983

G.C.D.
HOBBS OFFICE