

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
SHELL WESTERN E&P INC.

Address
P. O. BOX 576, HOUSTON, TEXAS 77001 (WCK 4435)

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 LIVINGSTON	Well No. 2	Pool Name, Including Formation BLINEBRY OIL & GAS	Kind of Lease XXXXXX Fee	Lease No.
Location Unit Letter W ; 660 Feet From The SOUTH Line and 1980 Feet From The EAST Line of Section 3 Township 21-S Range 37-E , 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 PIPE LINE CORPORATION	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1910, MIDLAND, TX 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> TEXACO INC. Production	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1137, EUNICE, NM 88231
If well produces oil or liquids, give location of tanks. Unit S Sec. 3 Twp. 21-S Rge. 37-E	is gas actually connected? When YES 1-09-86

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 <input type="checkbox"/>	New Well <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res. <input checked="" type="checkbox"/>
Date Spudded 2-14-50	Date Compl. Ready to Prod. 1-09-86	Total Depth 6674'	P.B.T.D. 6085'
Elevations (DF, RKB, RT, GR, etc.) 3433' DF	Name of Producing Formation BLINEBRY	Top Oil/Gas Pay 5559'	Tubing Depth 5540'
Perforations 5559' - 5950'			Depth Casing Shoe 6674'
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/4"	13-3/8" (32.4#)	224'	300 SX REGULAR
11"	8-5/8" (32#)	3148'	700 SX REG + 3000 SX 3%
7-7/8"	5-1/2" (15.5#)	6674'	600 SX REG

V. 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)

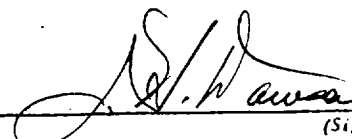
Date First New Oil Run To Tanks 1-09-86	Date of Test 1-19-86	Producing Method (Flow, pump, gas lift, etc.) PUMP	
Length of Test 24 HRS	Tubing Pressure 30	Casing Pressure 30	Choke Size
Actual Prod. During Test	Oil-Bble. 12	Water-Bble. 8	Gas-MCF 303

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (psia, 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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)
A. J. FORE
SUPERVISOR REG. & PERMITTING
(Title)
JANUARY 31, 1986
(Date)

OIL CONSERVATION DIVISION
APPROVED **APR 15 1986**, 19____
BY **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR
TITLE _____

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 deviate 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 filled for each pool in multiple recompleted wells.