

# OIL CONSERVATION DIVISION

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

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

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

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator <b>Charles B. Gillespie, Jr.</b>		Well API No. 30-025-32335
Address P.O. Box 8 Midland, Texas 79702		
Reason(s) for Filing (Check proper box)		<b>CASINGHEAD GAS MUST NOT BE FLARED AFTER <u>4-10-94</u> UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.</b>
New Well <input checked="" type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Other (Please explain)	
Recompletion <input 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 \_\_\_\_\_ THIS WELL HAS BEEN PLACED IN THE POOL: R-10091 4/1/94  
DESIGNATED BELOW. IF YOU DO NOT CONCLUDE NOTIFY THIS OFFICE. Saunders, San Andres

II. DESCRIPTION OF WELL AND LEASE				
Lease Name State "Q"	Well No. 2	Pool Name, Including Formation San Andres <u>Wildcat</u>	Kind of Lease State, Federal or Fee	Lease No. VA-193
Location Unit Letter <u>K</u> : <u>1760</u> Feet From The <u>South</u> Line and <u>1760</u> Feet From The <u>West</u> Line Section <u>4</u> Township <u>15-S</u> Range <u>33-E</u> , NMPM, <u>Lea</u> 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"/> <u>Enron Energy Corp.</u>			Address (Give address to which approved copy of this form is to be sent) P.O. Box 10607 Midland, Texas 79702			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>			Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit <u>L</u>	Sec. <u>4</u>	Twp. <u>15</u>	Rge. <u>33</u>	Is gas actually connected? <u>No</u>	When ?

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 checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded <u>12-9-93</u>	Date Compl. Ready to Prod. <u>2-1-94</u>		Total Depth <u>4964</u>		P.B.T.D. <u>4964</u>			
Elevations (DF, RKB, RT, CR, etc.) <u>4205 GR</u>	Name of Producing Formation <u>San Andres</u>		Top Oil/Gas Pay <u>4956</u>		Tubing Depth <u>4944</u>			
Perforations <u>4956 - 4964 Open Hole</u>					Depth Casing Shoe <u>4932</u>			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>17-1/2"</u>	<u>13-3/8</u>		<u>347</u>		<u>400 SX</u>			
<u>11"</u>	<u>8-5/8</u>		<u>2909</u>		<u>400 SX</u>			
<u>7-7/8"</u>	<u>5-1/2</u>		<u>4932</u>		<u>150 SX</u>			
	<u>2-3/8</u>		<u>4944</u>					

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 <u>2-1-94</u>	Date of Test <u>2-3-94</u>	Producing Method (Flow, pump, gas lift, etc.) <u>PUMP</u>	
Length of Test <u>24 Hrs.</u>	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. <u>27</u>	Water - Bbls. <u>-0-</u>	Gas- MCF <u>-0-</u>

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.	
<u>Kevin Widner</u> Signature	Production Manager
<u>2-7-94</u> Date	<u>(915) 683-1765</u> Telephone No.

OIL CONSERVATION DIVISION	
Date Approved	<u>FEB 10 1994</u>
By	<u>ORIGINAL SIGNED BY JERRY SEXTON</u>
Title	<u>DISTRICT I SUPERVISOR</u>

- 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.