

NEW MEXICO OIL AND NATURAL GAS COMMISSION  
 REQUEST FOR ALLOWABLE  
 AND

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DISTRICT	
COUNTY	
LAND OFFICE	
OPERATION	
PRODUCTION OFFICE	

**I. OPERATOR**

TEXAS WEST OIL & GAS CORPORATION  
 Address  
 609 Midland National Bank Building 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**

Lessee Name <b>State "2"</b>	Well No. <b>2</b>	Pool Name, If Different, Formation <b>Antelope Ridge Atoka</b>	Kind of Lease State, Federal or Free <b>State</b>	Lease No. <b>L-3882</b>
Location Unit Letter <b>K</b> ; <b>1980</b> Feet From The <b>South</b> Line of <b>1980</b> Feet From The <b>West</b>				
Line of Section <b>2</b> Township <b>24-S</b> Range <b>34-E</b> <b>S&amp;M, Lea</b> County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authority Transporter of Oil  or Condensate  Address (Use address to which approved copy of this form is to be sent)  
**Shell Pipe Line Corporation** **P.O. Box 1910 Midland, Texas 79701**

Name of Authority Transporter of Casinghead Gas  or Dry Gas  Address (Use address to which approved copy of this form is to be sent)

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range	Is it naturally compressed?	Year
	<b>E</b>	<b>2</b>	<b>24S</b>	<b>34E</b>	<b>Yes</b>	<b>9-24-73</b>

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	Gas Well	New Well	Recover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	FURTHER					
Elevations (DF, S&P, RT, GR, etc.)	Name of Producing Formation	Length of Casing	Producing Depth					
Perforations		Depth of Casing Shoe						
<b>TUBING, CASING, AND SPENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

**V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL**

(Test must be after recovery of total volume of liquid 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	Production Volume (Flow, pump gas, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gow-MCF

**GAS WELL**

Actual Prod. During Test	Length of Test	Water-Bbls. (shut-in)	Quantity of Condensate
Testing Method (flow, 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.

**OIL CONSERVATION COMMISSION**

APPROVED \_\_\_\_\_, 1973

*Roy K. Valle*  
 (Signature)

Operations Manager  
 (Title)

26 September 1973  
 (Date)

This form is to be filed in compliance with Section 104 of the New Mexico Oil and Natural Gas Conservation Act. It is to be filed with the Oil and Natural Gas Commission, P.O. Box 1910, Midland, Texas 79701. This form is to be filed with the Commission and a copy is to be filed with the State Land Office. This form is to be filed with the Commission and a copy is to be filed with the State Land Office. This form is to be filed with the Commission and a copy is to be filed with the State Land Office. This form is to be filed with the Commission and a copy is to be filed with the State Land Office.