### Shell Western E&P Inc.



A Subsidiary of Shei: Or Company

P.O. Box 576 Houston, TX 77001

May 26, 1989

Mr. David Catanach State of New Mexico Energy, Minerals and Natural Resources Department Oil Conservation Division P. O. Box 2088 Santa Fe, NM 87504-2088

Dear Mr. Catanach:

SUBJECT: AREA OF REVIEW WELLS

SHELL-NORTHEAST DRINKARD UNIT

NORTH EUNICE BLINEBRY-TUBB-DRINKARD OIL & GAS POOL

WELL NO. 322-S

SECTION 2, T21S, R37E LEA COUNTY, NEW MEXICO

Further to our application for injection for the subject well dated April 6, 1989, and responsive to your letter dated May 15, 1989, please find attached the requested tabulation of area of review wells. Should any well lack the necessary construction data required as evidence in Case No. 9232, or if additional information is required, please contact Marcus Winder at (713) 870-3797.

Yours very truly,

J. H. Smitherman Regulatory Supervisor Western Division

JMW:SJK

Attachment

State of New Mexico Energy, Minerals and Natural Resources Department Oil Conservation Division P. O. Box 1980

Hobbs, NM 88241-1980

MAY 3 0 1989

OIL CONSERVATION DIV. SANTA FE

### NORTHEAST DRINKARD UNIT NO. 322W

#### Lea County, New Mexico

## Wells Within 1/4 Mile Radius

Operator*	Well Name	Unit No.	Sec.		Loca	tion	
Meridian	State 2 #1	214	2	3300	FSL a		FWL
√Meridian →	State 2 #3	215	2		FSL 8		
√SWEPI	State 2 #15	216	$\bar{2}$	3546	FNL		FWL
/SWEPI	State 2 #16	218	C.	3546	FNL a		FWL
SWEPI	State 2 #18	219	2	3550	FSL a		FWL
Chevron Chu	Hry Leonard #6	221	65 2	2983	FSL a		FEL
Chevron	Hry Leonard #11	223	2	2970	FSL a		FEL
∕Conoco	Hawk B-3 #11	308	3	1980	FSL 6		FEL
Conoco	Hawk B-3 #7₺2	309	3	1830	FSL a		FEL
/SWEPI	State 2 #1	311	Z;	1980	FSL (		FWL
SWEPI U	State 2 #21	312	2	2205	FSL a		FWL
√SWEPI	State 2 #4	313	2	710	FSL a		FWL
∕SWEPI	State 2 #22	314	<del>(7)</del>	990	FSL &		FWL
-SWEPI	State 2 #9	315	2	1980	FSL &		FWL
-SWEPI	State 2 #19	316	2	2310	FSL a		FWL
SWEPI O	State 2 #20	317	<u>€</u> 1	990	FSL a		FWL
Chevron	Hry Leonard #18	318	2.	1650	FSL a		FEL
uChevron	Hry Leonard #9	319	2:	1650	FSL a		
∠ Chevron	Hry Leonard #19	320	2		FSL 8		
,							
Conoco	Hawk B-3 #3		3	2970	FSL 3	510	FEL
Conoco	Hawk B-3 #4	ener an ana	3	2130	FSL &	660	FEL
<pre>/Meridian</pre>	State 2 #4		2	2970	FSL &	990	FWL
SWEPI	State 2 #3	m4 17 m.	2	660	FSL 8	660	FWL
-SWEPI	State 2 #5		2	1880	FSL &	560	FWL
✓SWEPI	State 2 #7	en i vede van	2	660	FSL 8	1980	FWL
SWEPI	State 2 #10		2	2310	FSL 8	988	FWL
SWEPI	State 2 #12	Mark Marks Arms	2	2250	FSL 8	2140	FWL
SWEPI	State 2 #13		2	2970	FSL &	k 1650	FWL
SWEPI	State 2 #14		2	3630	FSL 8	k 1770	FWL
Chevron	Hry Leonard #1	,	2	1980	FSL 8	£ 1980	FEL
Chevron	Hry Leonard #2		2	660	FSL 8		FEL
Chevron	Hry Leonard #4		2	860	FSL 8		FEL
Chevron of	Hry Leonard #7		2	2220	FNL 8		FEL
Chevron	Hry Leonard #15		2	3312	FSL 8	2317	FEL

<sup>\*:</sup> In the case of Unit wellbores, the pre-Unitization operator is shown.

VZS, 5/24/89 Will checked to

•	SA TAFE FI E .G.S. L ID OFFICE TRANSPORTER OIL GAS OPERATOR	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65 GAS
1.	Operator  Gulf Qil Corporation		CASINGHEAD GAS FLARED AFTER	MUST NOT HE
	Address		UNLESS AN EXCE. IS OBTAINED.	PTION TO R-4070
	Reason(s) for filing (Check proper box)	xico 88240	Other (Please explain)	
	New Well  Recompletion  Change in Ownership	Change in Transporter of: Oil Dry Ga Casinghead Gas Conder	<b>=</b> 1	bb 0 <b>1</b> 1
	If change of ownership give name and address of previous owner	THIS WELL HAS BEEN PLA  DESIGNATED BELOW. IF YOU  NOTIFY THIS OFFICE.	NCED IN THE POOL	
II.	DESCRIPTION OF WELL AND I	11110 01110		SA
	Harry Leonard (NCT-F)	7 Tubb 011	State, Feder	
		Mahip 21-S Range 3	ne and 2317 Feet From	The <b>East</b> Lea County
HI.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS	
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	
	Name of Authorized Transporter of Cas	inghead Gas X or Dry Gas	Box 1142, Midland, Te: Address (Give address to which appro	xas 79701 ored copy of this form is to be sent)
, ,	None - Waiting on comm If well produces oil or liquids, give location of tanks.	Ingling permit Unit   Sec.   Twp.   P.ge.  J 2 21-S 37-E	Is gas actually connected? W	hen
IV.	If this production is commingled wit COMPLETION DATA			No
	Designate Type of Completio		Hew Well Workover Deepen	Plug Back   Same Resiv. Diff. Resiv.
	Date Sanded Recompleted	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
ı	9-15-74 Elevations (DF, RKB, RT, GR, etc.)	9-15-74 Name of Producing Formation	8700 Top Cil. ( Km Pay	6609 Tubing Depth
	3496' GL	Tubb	6387	6590'
	6387' to 6564'			Depth Casing Shoe 8280
			CEMENTING RECORD	
	17-1/2"	CASING & TUBING SIZE  13-3/8"	300'	SACKS CEMENT  350 sacks (Circulated)
	12-1/4"	9-5/8"	29991	1657 sacks (TOC at 2351)
	8-3/4"	7" 2-3/8"	8280 ' 6590 '	700 sacks (TOC at 3750)
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oi	l and must be equal to or exceed top allow-
1	OIL WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours)  Producing Method (Flow, pump, gas	lift, etc.)
	9-15-74	10-2-74	Pump	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	24 hours Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF
	92 barrels	60	32 (Load water)	<u> </u>
	GAS WELL		57	3 Lanute 1.10
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
1.	CERTIFICATE OF COMPLIANO	Œ	OIL CONSERV	ATION COMMISSION
,	I hereby certify that the rules and r	equistions of the Oil Conservation	APPROVED OCT	19
	Commission have been complied wabove is true and complete to the	ith and that the information given	BY ARCH	Alwest
	move is this and combiets to the	week or my knowledge and belief.	TITLE SUPERVIS	OR PATERICT I
	A	_	11	compliance with RULE 1104.
	1 Spanking		wall this form must be accome	wable for a newly drilled or deepened anied by a tabulation of the deviation
	Area Engineer	da)	tests taken on the well in acc. All sections of this form m	ordance with RULE 111.
	October 2, 1974		able on new and recompleted with Fill out only Sections I, well name or number, or transpo	vells.  II. III. and VI for changes of owner, item or other such change of condition.
	·		11 ~ ~	

# HUMBER OF COP -S RECEIVED 4 DISTRIBUTION EARLY FF FILE U.S. e. S. LAND OFFICE TRANSPORTER QAS PRORATION OFFICE

OFFRATOR

## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe. New Mexico

(Form C-10s) Revised 7/1/57

## REQUEST FOR (OIL) - (GAS) ALLOWARLE (1991)

New Well

This form shall be submitted by the operator before an initial allowable will be assigned than completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

•			Hobbs, New Mexico July 39, 1962 (Place) (Date)
WE ARE	HEREBY R	EOUESTI	ING AN ALLOWABLE FOR A WELL KNOWN AS:
			Harry Leonard E WFH , Well No. 4 , in SW 1/4 SE 1/4,
(0	ompany or O	erator)	(Lease)
Timble L			T 21-S R 37-E NMPM Drinkard Pool
Le	<b>a</b>		Recompleted Pate Spudded 7-24-62
	se indicate		Elevation 3487 Total Depth 7778 PBTD 6886
DC	C B	TA	Top Oil/938 Pay 6698 Name of Prod. Form. Drinkard
		^	PRODUCING INTERVAL -
			Perforations 6770-82, 6755-571, 6735-371, 6719-211, 6707-091 & 6700-66
E	F G	H	Open Hole Casing Shoe 7777' Depth Tubing 6836'
			OIL WELL TEST -
L	K J	I	Choke Natural Prod. Test: bbls.oil, bbls water in hrs, min. Size
- M	N O	P	Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 116 bbls.oil, 33 bbls water in 24 hrs. min. Size 2 10
.	•		
	960 FGT		GAS WELL TEST -
	860 FSL,		Material From Test.
•	sing and Com	_	Method of Testing (pitot, back pressure, etc.):
Size	Feet	SAX	Test After Acid or Fracture Treatment: MCF/Day; Hours flowed
12-3/4	H 259	300	Choke Size Method of Testing:
4 /6-22		<u> </u>	
8-5/8	2989	1100	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 500 gals 15% NEA, 8000 gals retarded acid.
			Casing Tubing 7400 Date first new Press. 0 Press. 3500 oil run to tanks 7-23-62
5-1/2	* 7777	870	
22/RI	6836	•	Oil Transporter Shell Dipeline Corp.
2-5/0	45 3	-3.75	Gas Transporter Warren Petroleum Corpe
Remarks:	Avandon	ed wantz	and recompleted in Drinkard 611
11211	wy	D. F. J.	Cr ru Russis IX If the gent to the
	······································		
I here	by certify the	at the info	formation given above is true and complete to the best of my knowledge.
pproved	·		, 19 Gulf Oil Corporation (Company or Operator)
			$\sim$
0	IL CONSE	RVATION	COMMISSION By: (Signature)
	1//	h.	
<b>19</b> :	/ <i>-{-/</i> }	f.f	Title Area Production Manager Send Communications regarding well to:
Title		<u>//</u>	Name Gulf Oil Corporation
			Address Box 267, Hobbs, New Mexico