OIL CONSERVATION DIVISION

DRAWER	DD	A	RTE	SIA	MM
	DISTRICT	OFFICE	Ē	II	

July thru December 1992 2086 T

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SUPPLEMENT TO THE OIL PROPATION SCHEDULE

November 25, 1992
ALLOWABLE ASSIGNMENT - TESTING
Effective November 1, 1992 a testing allowable of 1000 barrels of oil
is hereby assigned to Bird Creek Res. Inc., Williams Estate #1-P-34-23-28
in the Morth Malaga Bone Spring Pool for the month of November 1992.
MW/seed
Bird Creek Res. Inc.
PPC
OIL CONSERVATION DIVISION
mp welliams
DISTRICT SUPERVISOR

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Linergy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

NOV 1 9 1992 at Bottom of Page An

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

P.O. Box 2088 Santa Fe. New Mexico 87504-2088 O. C. D.

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	REQUEST	FOR ALLOWAE	BLE AND AUTHO	RIZATION				
I.			AND NATURAL	. GAS				
Operator Bird Creek Resource	s, Inc.	/ Well				API Na. 1-015-27173		
Address 810 South Cincinnat	i. Suite 110	Tulsa, Okla	ahoma 74119					
Reason(s) for Filing (Check proper box)			Other (Please	explain)				
New Well	Change	in Transporter of:	Request a	•	able of 10	100 BO		
Recompletion	Oil l	☐ Dry Gas ☐	•	uring reco				
Change in Operator	Casinghead Gas	Condensate						
II. DESCRIPTION OF WELL	AND LEASE							
Lease Name	Well N				of Lease		ase No.	
Williams Estate Location	1	N. Malaga	a Bone Spring	State,	Federal or Fee	Fee	<u> </u>	
Unit Letter P	: 330	Feet From The	outh Line and	330 Fe	et From The	East	Line	
Section 34 Towns	hip 23S	Range 28E	, NMPM,		Eddy		County	
III. DESIGNATION OF TRA	NSPORTER OF	OIL AND NATU	RAL GAS					
Name of Authorized Transporter of Oil	Or Con	densale	Address (Give address	= -			nr)	
Pride Pipeline Co. Name of Authorized Transporter of Casi	nghead Gas			P.O. Drawer 2948 Midland, TX 7970 Address (Give address to which approved copy of this form is to				
		· · · · · ·	. Tourse Corre address	which approved	copy of this Join	1 15 10 DE SE	nu)	
If well produces oil or liquids, give location of tanks.	Unit Sec.		Is gas actually connect		7			
If this production is commingled with the IV. COMPLETION DATA	P 34 at from any other lease	or pool, give comming	Vented during Jing order number:	testejd				
Designate Type of Completion	n - (X) Oil W	Vell Gas Well	New Well Workov	er Doepen	Plug Back Sa	ime Res'v	Diff Res'v	
Date Spudded	Date Compl. Read	₹	Total Depth		P.B.T.D.			
10-28-92 Elevations (DF, RKB, RT, GR, etc.)	11-16-92		6475 1		6426'			
3020' GR	Name of Producing Formation Bone Spring		Top Oil/Gas Pay 6352 '		Tubing Depth			
Perforations 1 spf @ 6352 - 6351			1		Depth Casing 5			
			CEMENTING REC	CORD	-J			
HOLE SIZE	CASING & 8.625", 2	TUBING SIZE	0-351	SET	SACKS CEMENT			
7.875"		5.5. 15.5#		0-6466'		200, cmt. circ. 770 sxs.		
v.	2101 2010		0 0400		1// 3/3	·		
V. TEST DATA AND REQUE								
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Test	me of load oil and mus	be equal to or exceed to Producing Method (Flo	p allowable for the	s depth or be for	full 24 hou	rs.)	
	Date of 102		1 reducing intented (1-16	iw, pump, gas iyi,	iic.) 			
Length of Test	Tubing Pressure	Tubing Pressure Casi		Casing Pressure		Choke Size		
Actual Prod. During Test	Oil - Bbls.		Water - Bbla		Gas- MCF		· · · · · · · · · · · · · · · · · · ·	
GAS WELL	-			· · · · · · · · · · · · · · · · · · ·	<u> </u>	··· · · · · · · · · · · · · · · · · ·		
Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/MM	op Common Commo	Gravity of Coo	densate		
l'esting Method (pitot back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size			
VI ODED I TOTAL			-	······································				
VI. OPERATOR CERTIFIC				ONSERV	ATION D	Meic	NI.	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above			OIL CONSERVATION DIVISION					
is true and complete to the best of my	y knowledge and belief	r.	Date Appr	oved _	NOV 2 5	1992		
Brad D. Bu	elec_			ORIGINAL	SIGNED BY			
Signature ; Brad D. Burks Agent			By	BY MIKE WILLIAMS				
Printed Name		Title	Title	SUPERVIS(OR, DISTRIC	r II		
11-16-92 Date		582-3855 Telephone No.						
			<u> </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.