

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

JAN 02 1981

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASO. C. D.
ARTESIA, OFFICE

RECEIVED BY

APR 12 1985

O. C. D.

ARTESIA, OFFICE

Fred Pool Drilling, Inc.

Address

1300 Clovis Star Rt. Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)

New Well ☒
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Name change only

If change of ownership give name
and address of previous owner

no change in ownership

Fred Pool Drilling, Inc.

DESCRIPTION OF WELL AND LEASE

Lease Name Corn Bros. Inc.	Well No. #1	Pool Name, Including Formation Wildcat Wildcat <i>Pecos Shale</i>	Kind of Lease State, Federal or Free Fee	Lease Fee
Location Unit Letter B, 1980 Feet From The E Line and 660 Feet From The N Line of Section 19 Township 6s Range 25e, NE4E, Chaves Co				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
Transwestern Pipeline Co.	P.O. Box 2521 Houston, Texas 77001	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. B 19 6S 25E	Is gas actually connected? When No Yes Approximately 1-15-81

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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

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.

Secretary

(Signature)

(Title)

3-31-85

(Date)

OIL CONSERVATION DIVISION

MAY 3 1985

APPROVED _____, 19

Original Signed By

BY Les A. Clements

Supervisor District II

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 deviatio
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for allow
able 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 conditioSeparate Forms C-104 must be filled for each pool in multipl
completed wells.



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