

JUN 07 1983

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LAND OFFICE	
TRANSPORTER	OIL <input checked="" type="checkbox"/>
	GAS <input type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRORATION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
ARTESIA, OFFICE

Operator
STEVENS OPERATING CORPORATION

Address
P. O. Box 2408, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)
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

DESCRIPTION OF WELL AND LEASE R-7372 10/20/83
Lease Name: Sorenson Federal Well No.: 1 Pool Name, including Formation: Wildcat San Andres Kind of Lease: Federal NM Lease No.: 27794

Location
Unit Letter H : 1980 Feet From The North Line and 660 Feet From The East
Line of Section 18 Township 7S Range 27E NMPM Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil XX or Condensate: Navajo Crude Oil (Give address to which approved copy of this form is to be sent) P. O. Drawer 175, Artesia, New Mexico 88210

Name of Authorized Transporter of Casinghead Gas or Dry Gas
It well produces oil or liquids, give location of tanks. Unit: H Sec: 18 Twp: 7S Rge: 27E Is gas actually connected? No

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded: 5-7-83	Date Compl. Ready to Prod.: 5-19-83	Total Depth: 2080'	P.B.T.D.: 2060'					
Elevations (DF, RKB, NT, GR, etc.): 3942.5 GR	Name of Producing Formation: San Andres	Top Oil/Gas Pay: 1747.5	Tubing Depth: 1772'					
Perforations: 1747.5, 48, 54.5, 55, 55.5, 57, 57.5, 58, 71, 72, 73, 73.5, 74								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	300'	350
7 7/8"	4 1/2"	2080'	275
	2 3/8"	1772'	

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: 5-21-83	Date of Test: 5-21-83	Producing Method (Flow, pump, gas lift, etc.): Pump
Length of Test: 24 hrs.	Tubing Pressure	Casing Pressure
Actual Prod. During Test: 69	Oil-Rbbls.: 12	Water-Rbbls.: 57 bbls. load water
		Gas-MCF: Not Measured

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	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.

Bar Thompson
(Signature)
Production Controller
(Title)
May 23, 1983
(Date)

OIL CONSERVATION DIVISION
APPROVED JUN 9 1983, 19
BY *Larry Brooks*
Geologist
TITLE
This form is to be filed in compliance with RULE 1104.
If this is request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of ownership, well name or number, or transporter, or other such change of condition.
Separate Form C-104 must be filed for each pool in multiply completed wells.