GY AND MINERALS DEPARTMENT

DISTRIBUTION	
SANTA FE	✓
FILE	✓
U.S.G.S.	
LAND OFFICE	
TRANSPORTER OIL	✓
TRANSPORTER GAS	
OPERATOR	✓
PRORATION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Revised 10-1-78

RECEIVED

OCT 21 1983

O. C. D.

ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator

O. I. L. ENERGY INC. ✓

Address

5055 KELLER SPRINGS, SUITE 300, P.O. BOX 802405, DALLAS, TEXAS 75380

Reason(s) for filing (Check proper box)

- New Well [X]
- Recompletion [ ]
- Change in Ownership [ ]
- Change in Transporter of: Oil [ ] Dry Gas [ ] Casinghead Gas [ ] Condensate [ ]

Other (Please explain)

CASINGHEAD GAS MUST NOT BE FLARED AFTER 4-16-84 ✓ UNLESS AN EXCEPTION TO RULE 306 IS OBTAINED

If change of ownership give name and address of previous owner _____

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
J. O'BRIEN "25"	1	Wildcat SAN ANDRES	State, Federal or Fee FEE	

Location

Unit Letter L ; 660' Feet From The WEST Line and 1780 Feet From The SOUTH

Line of Section 25 Township 7-S Range 28-E , NMPM, CHAVES County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]: ~~Gulf Mobile Gas~~ NAVAJO PIPELINE CO.

Address (Give address to which approved copy of this form is to be sent): P.O. BOX 159, ARTESIA, NEW MEXICO 88210

Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [ ]:

Address (Give 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.	Rge.	Is gas actually connected?	When
	L	25	7-S	28-E	NO	

If this production is commingled with that from any other lease or pool, give commingling order number: NONE

III. COMPLETION DATA

Designate Type of Completion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X			X		

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
6-3-83	9-1-83	7305'	~~2755'~~ 2812'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
G.L. 4085' RKB 4107'	SAN ANDRES	~~2570~~ 2774'	~~2588'~~

Perforations	Depth Casing Shoe
2684-78; 2592-74'	2812'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17½"	13⅜ 48#	375'	425 SURFACE
12¼	9 5/8 36#	2812	1275 SURFACE
8¾	5½ 17#	7020	620 5000'
	2⅜	2746	

IV. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
9-7-83	10-5	PUMP	First ID-2 10-16-83 temp + PR

Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 HRS	25#	25#	NONE

Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
53	26	27	25

GAS WELL

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

V. 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.

Tom L. Carrens
(Signature)

DRLG'G PROD. SUPRV.
(Title)

10-12-83
(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 16 1984, 19____

BY Original Signed By Leslie A. Clements

TITLE Supervisor District II

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 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 owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.