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PRODUCTION OFFICE	
Operator	

P.O. BOX 2088
ARTESIA, NEW MEXICO 87501RECEIVED BY
APR 23 1986REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
ARTESIA, N.M.

STEVENS OPERATING CORPORATION

Address

P.O. BOX 2408, 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)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Well Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Red Lake Ridge	1	Red Lake Ridge - San Andres	Fee	

Location

Unit Letter C: 760 Feet From The North Line and 1660 Feet From The WestLine of Section 21 Township 8S Range 29E NMPH Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate	(Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing Company	P.O. Drawer 175, Artesia, New Mexico 88210
Name of Authorized Transporter of Casinghead Gas or Dry Gas	(Give address to which approved copy of the form is to be sent)
Liquid Energy Corporation	P.O. Box 4000, The Woodlands, Texas 77380
Is well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit c	21 8S 29E yes 12/2/85

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 Sp. V.	Diff. Sp. V.
		X			X		X		X
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
8-30-83	5-21-85		8530'			3527'			
Elevations (Dr. B.S., ST, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
3950.0 GR	San Andres		2874			2869			
Perforations						Depth Casing Shoe			
2874 - 2902½ San Andres									

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	340'	340
11"	8 5/8"	2215'	200
7 5/8"	5 1/2"	8529'	870
	2 3/8"	2869'	

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)

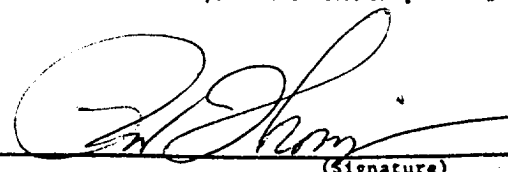
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
6-27-85	7-1-85	Pumping
Length of Test	Tubing Pressure	Casing Pressure
24 hrs	35#	35#
Actual Prod. During Test	Oil-able.	Water-able.
100 bbls	5	95
		95

GAS WELL

Actual Prod. Test-24 hrs	Length of Test	Rate Condensate/24hrs	Gravity of Condensate
Testing Method (flow, 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.



(Signature)

Production Controller

(Title)

4/22/86

(Date)

OIL CONSERVATION DIVISION

APPROVED APR 25 1986, 19BY Original Signed ByLes A. ClementsTITLE Supervisor District 11

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.

