

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.M.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	NAT
REGISTRATION OFFICE	

Read & Stevens, Inc.

Address P.O. Box 1518, Roswell, NM 88201

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☒	CASINGHEAD GAS MUST NOT BE FLARED AFTER <u>4-1-82</u> UNLESS AN EXCEPTION TO Rule 306 IS OBTAINED By # 2-595
Recompletion ☐	
Change in Ownership ☐	
Change of ownership give name and address of previous owner	

DESCRIPTION OF WELL AND LEASE	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Lease Name	1	Headwaters S. Lucky Lake Pool	XXX, Federal XXXXX	NM-14482

Location	Unit Letter	M	330	Feet From The	South	Line and	330	Feet From The	West
Line of Section	15	Township	15S	Range	29E	County	Chaves		

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Oil ☒ or Condensate ☐	P.O. Box 2256, Wichita, KS 67201				
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.	Is gas actually condensed? When				
Unit M	Sec. 15	Twp. 15S	Range 29E	-	-

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

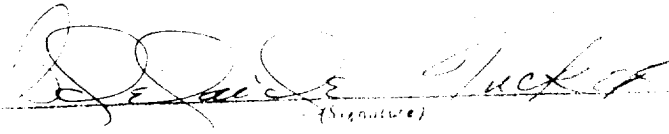
COMPLETION DATA	Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Well over	Deepen	Plug Back	Side Drilling	Drill. Ream
Date Spudded	11/30/81	Date Compl. Ready to Prod.	2/1/82	Total Depth	1950'	PLUGGED	1915'		
Deviation (DF, RKB, RT, etc.)	3857' GR	Name of Producing Formation	Queen	Top of Producing Layer	1777'	Testing Depth	1758.09'		
Perforations	1777-90'					Depth Casing Shoe	1950'		

TUBING, CASING, AND CEMENTING RECORD	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	12 1/4"	8 5/8"	284'	180 sx.
	7 7/8"	4 1/2"	1950'	400 sx.
		2 3/8"	1758.09'	

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of initial volume of fluid oil and must be equal to or exceed top allowable for this depth or greater in 24 hours)

TEST DATA AND REQUEST FOR ALLOWABLE	Date First New Oil Run To Tanks	Date of Test	Production, (bbls./hr., pump, gas lift, etc.)
	1/1/82	1/29/82	Pumping
Length of Test	24 hrs.	Testing Pressure	Casing Pressure
			Choke Size
Actual Prod. During Test	20	Oil-bbls.	19
			Water-bbls.

GAS WELL	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (prior, back pt.)	Testing Pressure (lb./sq. in.)	Casing Pressure (lb./sq. in.)	Choke Size	

CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
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.	APPROVED FEB 22 1982
 (Signature)	BY <u>W.A. Gussert</u>
Production Clerk	TITLE <u>SUPERVISOR, DISTRICT II</u>
February 4, 1982	This form is to be filed in compliance with RULE 1104.
(Date)	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 all wells, on new and recompleted wells.
	Fill out only Sections I, II, III, and VI for changes of owner, well name, or name of transporter or other such change of condition.
	Separate Form C-104 must be filed for each pool in multiple completion wells.

RECEIVED

FEB 18 1982

O. C. D.

ARTESIA OFFICE