

NEW MEXICO OIL CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
 Supersedes OIL C-101 and C-102
 Effective 1-1-65

RECEIVED

JUN 24 1980

O. C. D.
 ARTESIA, OFFICE

DISTRICT OFFICE	
SARFA FE	1
FEE	1
U.S.G.S.	1
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	X
REGISTRATION OFFICE	

Talmadge Oil Co.

Address
 Star Route West Box 41 Artesia, New Mexico 88210

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Coalhead Gas Condensate Change of ownership effective 6-1-80

If change of ownership give name and address of previous owner: The Dow Company P.O. Box 885 Artesia, New Mexico 88210

DESCRIPTION OF WELL AND LEASE

Lease Name: S.W. Henshaw Premier Unit Well No.: 2 Pool Name, including Formation: West Henshaw Grayburg Kind of Lease: Federal State, Federal or Fee: Federal Lease No.: NM 0610

Location: Unit Letter P; 990 Feet From The South Line and 330 Feet From The East

Line of Section 7 Township 16S Range 30E, NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil (X) or Condensate () Navajo Refining Co., Pipeline Division Address (Give address to which approved copy of this form is to be sent) North Freeman, Artesia, New Mexico

Name of Authorized Transporter of Casinghead Gas (X) or Dry Gas () Phillips Petroleum Co. Address (Give address to which approved copy of this form is to be sent) 4th & Washington, Odessa, Texas

If well produces oil or liquids, give location of tanks. Well: F Soc: 17 Twp: 16S Rge: 30E Is gas actually connected? Yes When: 7-1960

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 Seize Res'n. P.H. ID

Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.

Elevations (DF, RKB, RT, CR, 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 liquid oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Ran To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)

Length of Test Tubing Pressure Casing Pressure Choke Size Post-1 D 3 6-30-80

Actual Prod. During Test Oil - Bbls. Water - Bbls. Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MCF 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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Daney King
 (Signature)
 Clerk

June 20, 1980

(Date)

OIL CONSERVATION COMMISSION

JUN 30 1980

APPROVED _____, 19

BY *Mike Williams*

TITLE **OIL AND GAS INSPECTOR**

This form is to be filed in compliance with RULE 1104.

If this be a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the pressure tests taken on the well in accordance with RULE 111.

All portions of this form must be filled out completely for all applicable sections of newly drilled wells.

Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter, or other such change of conditions.