

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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JUN 13 1983

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Address JOE L. TARVER V
3405 69th DR. Lubbock, TEXAS 79413

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

New Well ☐ Change in Transporter of:
Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐ CHANGE PHYSICAL OPERATOR

Change in Ownership ☐

Change of ownership give name
and address of previous ownerTom R. Minihan
P.O. Box 4364 Midland, Texas 79701

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
<u>SRLG - UNIT</u>	<u>142</u>	<u>Red Lake Grayburg</u>	<u>Federal</u>	<u>LCO-0158</u>

Location

Unit Letter H ; 2080 Feet From The North Line and 560 Feet From The East

Line of Section 35 Township 17 South Range 29 East NE1/4 Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
Navajo Refining Co. Pipe Line Division N. Freeman, Artesia, New Mexico

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
NONE

Well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	<u>A</u>	<u>35</u>	<u>17</u>	<u>29</u>		

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 Ready	Diff. Ready
Is Spudded	Date Compl. Ready to Prod.			Total Depth		P.B.T.D.		
Interventions (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay		Tubing Depth		
Interventions						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE
WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed to allow-
able for this depth or b* for full 24 hours)

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

AS WELL

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

Joe L. Tarver
(Signature)
Owner
(Title)
JUNE 10-1983
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 21 1983, 19Original Signed By
BY Leslie A. Clements
Supervisor District II

TITLE

This form is to be filed in compliance with RULE 1104

If this is a request for authorization for a newly drilled or deepened
well, this form must be accompanied by a tabulation of the division
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for allow-
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes in owner,
well name or number, or transports, or other such change of conditions.Separate Form O-104 must be filed for each pool in multi-
completed wells.