	the production of the second		-					
<i></i>	NO. OF COPIES RECEIVED							
	DISTRIBUTION /	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C-104				
	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110				
	FILE		AND	Effective 1-1-65				
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS				
	LAND OFFICE							
	TRANSPORTER OIL							
	GAS /							
	OPERATOR 2							
I.	PRORATION OFFICE /	1		RECEIVED				
••	Operator							
	Shell Oil Company	- Western Division						
	Address			OCT 1 4 1965				
	P. 0. Box 1509, Mi	idland, Texas 79704						
	Reason(s) for filing (Check proper box)		Other (Please explain)	C. C. C.				
	New Well	Change in Transporter of:		ARTESIA, OFFICE				
	Recompletion	Oil Dry Gas	s 🔄					
	Change in Ownership	Casinghead Gas 📃 Conden	usate					
			·					
	If change of ownership give name							
	and address of previous owner							
TT	DESCRIPTION OF WELL AND I	(EASE						
	DESCRIPTION OF WELL AND I	Well No. Pool Nar	me, Including Formation	Kind of Lease				
	Henshaw Deep Uni	lt 13 He	enshaw-Wolfcamp	State, Federal cr Fee Federal				
	Location							
			0	- onet				
	Unit Letter 0 ; 66	O Feet From TheSOUTALine	e and 1980 Feet From	The				
		nship 16 5 Range	30E , NMPM,	Eddy County				
	Line of Section 23 , Tow	unship LDS Range	30E , NMPM,	Eddy				
		TTO OF OUL AND NATURAL CA	C					
III.	DESIGNATION OF TRANSPORT	X or Condensate	Address (Give address to which appr	oved copy of this form is to be sent)				
	Continental Oil Compe Name of Authorized Transporter of Cas	inchead Gas XI or Dry Gas	P. O. Box 410, Artesia Address (Give address to which appr	<u>New Mex1Co Oo210</u>				
	Phillips Petroleum Co			Lding, Odessa, Texas 79760				
	If well produces oil or liquids,	Unit Sec. Twp. Rge.						
	give location of tanks.	C 24 16S 30E	yes	October 7, 1965				
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:					
IV.	COMPLETION DATA							
	Designate Type of Completio	on = (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.				
	Designate Type of Completio		1					
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
	July 29, 1965	October 7, 1965	8950'	8897'				
	Pool	Name of Producing Formation	Top Cil XCus Pay	Tubing Depth				
	Henshaw-Wolfcamp	Wolfcamp	86831	8708 '				
	Perforations 8683', 8685',	8693', 8695', 8720', 872	26', 8729', 8735',	Depth Casing Shoe				
	8739', 8755',	8739', 8755', 8759', 8763' 8954'						
			CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
	15"	11 3/4"	524'	500				
	11"	8 5/8"	30901	1000				
	7 7/8"	5 1/2"	8954!	350				
	<u>1_1/9</u>	0"	87081					
				l and must be equal to or exceed top allow-				
V.	TEST DATA AND REQUEST FO	JR ALLUWABLE (lest must be a) able for this de	fter recovery of total volume of load of opth or be for full 24 hours)	e and mass of equal to or exceed top attow-				
	lift, etc.)							
	Date First New Oil Run To Tanks	October 7, 1965	Flowing					
	October 7, 1965	Tubing Pressure	Casing Pressure	Choke Size				
	24 hours	1200	-	11/64" N.				
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF				
	184 BO	184	0	523				
	104 B0	104	<u> </u>					
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate				
	Actual Ploa. Test-MCP/D							
			Casing Pressure	Choke Size				
	Testing Method (pitot, back pr.)	Tubing Pressure	Cushig Flessure	CHOKE BILE				
	L	l	l					
VI	. CERTIFICATE OF COMPLIANO	CE		ATION COMMISSION				
			OCT 1 4 19	165				
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED, 19					
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY ML amstrong					
	above is true and complete to the	best of my knowledge and belief.		F				
			TITLE GAS INSPE	FTNC				
	Cimed Ru			compliance with put = 1101				
	Original Signed By N. W. Harrison	N. W. Harrison		compliance with RULE 1104.				
			wall this form must be accome	owable for a newly drilled or deepened banied by a tabulation of the deviation				
	(Signature)		tests taken on the well in accordance with RULE 111.					
	Acting Division Product	tion Superintendent	All sections of this form m	nust be filled out completely for allow-				
	(Title)		able on new and recompleted v	wells.				
October 12, 1965			Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.					
	(Da	2te)		ist be filed for each pool in multiply.				
			completed wells.	· · · · · · · · · · · · · · · · · · ·				

NEW MEXICO OIL CONSERVATION COMMISSION

	OO OID COMPERATION CONTENDION	
Sbell Oil Campany OPERATOR <u>Vestern Division</u>	ADDRESS P. 0. 100 1509. M	dland, Taxas 79704
FIELD Hensboy-Wolfcamp	LEASE Hearboy Deep Unit	WELL NO. 13
LOCATION 660' 781 6 1980' 751 (8	8/4 \$2/4) Section 23, T-16-5, R-3	0-8, NATH Survey, Eddy County, New Merico
	DEVIATION RECORD	NUT ANELCO
100' = 2° 200' = 1° 300' = 1 5/4° 400' = 1/2° 500' = 1/4° 794' = 2° 1020' = 1 1/2° 2170' = 3/4° 2725' = 1/4°	5986' = 1 1/4° 6080' = 1 1/2° 6206' = 1 3/4° 6910' = 2° 7061' = 2° 7252' = 3° 7395' = 3 1/2° 7534' = 3 1/4°	RECEIVED
$3060^{\circ} = 1/2^{\circ}$ $3234^{\circ} = 1 1/4^{\circ}$ $3406^{\circ} = 2 1/4^{\circ}$ $4336^{\circ} = 2^{\circ}$	7844' = 3 3/4* 7947' = 3 3/4° 8016' = 3 1/2* 8111' = 3 3/4*	OCT 1 4 1965
4448' = 1/4° 4856' = 3° 4922' = 2 3/4° 5032' = 2 1/2° 5777' = 2°	$6196^{\circ} = 3 3/4^{\circ}$ $8472^{\circ} = 4 1/4^{\circ}$ $8630^{\circ} = 4 1/2^{\circ}$ $8670^{\circ} = 4 1/2^{\circ}$	

Certification of personal knowledge of Deviation Record:

I hereby certify that I have personal knowledge of the data and facts placed on this form, and that such information is true and complete.

5. 3. Des1 Signature Shell Oil Company Company

STATE OF TEXAS COUNTY OF MIDLAND

Before me, the undersigned authority, on this day personally appeared **5. Dep1**, known to me to be the person whose name is subscribed hereto, who, after being duly sworn, on oath states that he is acting at the direction and on behalf of the operator of the well identified in this instrument and that such well was not intentionally deviated from the vertical.

Skled	5.	3.	Des1
Signature			
Division Drilling	Superintendent		
Title			

Sworn and Subscribed to before me, this the **11th** day of **October**, 19 65

M. M. Dray_ Notary Public in and for Midland County,