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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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APR 9 1981

O. C. I.

ARTIFIAL OFFICE

Operator Read & Stevens, Inc. ✓	
Address P.O. Box 1518, Roswell, New Mexico 88201	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	CASINGHEAD GAS MUST NOT BE
Recompletion <input type="checkbox"/>	FLARED AFTER 6-1-81 ✓
Change in Ownership <input type="checkbox"/>	UNLESS AN EXEMPTION TO Rule 306
	IS OBTAINED

If change of ownership give name
and address of previous owner

Ent. 2-518

I. DESCRIPTION OF WELL AND LEASE

Lease Name Gulf West Mesa	Well No. 2	Pool Name, including Formation Bunkerhill Penrose	Kind of Lease State, Federal or Fee State	Lease No. E-4199
Location: Unit Letter D 660 Feet From The North Line and 660 Feet From The West Line of Section 24 Township 16S Range 31E, NMPM, Eddy County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Koch Oil Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2256, Wichita, Kansas 67201					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) -					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 13	Twp. 16S	Rge. 31E	Is gas actually connected? -	When -

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded 2-4-81	Date Compl. Ready to Prod. 4-1-81		Total Depth 4242'		P.B.T.D. 4182' 3790			
Elevations (DF, RKB, KT, GR, etc.) 4486.5' GR	Name of Producing Formation Penrose		Top Oil/Gas Pay 3600'		Tubing Depth 3661'			
Perforations					Depth Casing Shoe 4242'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		1252'		350sx HLC, 200sx "C"			
7 7/8"	4 1/2"		4242'		225sx HLC, 550sx "C"			
	2 3/8"		3661'					

IV. 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 3-18-81	Date of Test 4-1-81	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 30	Oil-Bbls. 29	Water-Bbls. 1	Gas-MCF 28

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

V. 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.

Bruce Stalls
(Signature)

Drilling & Production Manager
(Title)

April 3, 1981
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 9 1981

BY

W. A. Gressett

TITLE

SUPERVISOR, DISTRICT 3

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

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 allowable on new and recompleted wells.

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