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FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
GAS
OPERATOR

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

RECEIVED BY

DEC 27 1985

O. C. D.
ARTESIA, OFFICE

I. PRODUCTION OFFICE	
Operator Beach Exploration, Inc.	
Address 800 N. Marie Blvd Suite 200 Midland, Texas 79701	
Reason(s) for filing (Check proper box) Other (Please explain)	
New Well ☒	Change in Transporter or: ☐
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Exxon Federal	Well No. 3	Pool Name, including Formation High Lonesome (Queen)	Lease No. Federal NM26072
Location Unit Letter I : 330 Feet From The East Line and 1650 Feet From The South Line of Section 18 Township 16S Range 29E Eddy County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil or Condensate ☒	Address (Give address to which approved copy of this form is to be sent) The Permian Corporation, Permian (Eff. 9 / 1 / 87) O Box 1182 Houston, Texas		
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		
If well produces oil or liquids, give location of tanks	Unit P	Sec. 18	Twp. 16S
	Rge. 29E	Is gas actually connected? No When	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Same Restv. ☐	Diff. Restv. ☐
Date Spudded 11-14-85	Date Compl. Ready to Prod. 11-29-85	Total Depth 1820'	P.B.I.D. 1806'					
Elevations (DF, RAB, RT, CR, etc.) 3642, GV, 3648, KB	Name of Producing Formation Queen	Top Oil/Gas Pay 1717	Tubing Depth 1700					
Perforations 1717-1741		Depth Casing Shoe 1818						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4	CASING & TUBING SIZE 8 5/8	DEPTH SET 304	SACKS CEMENT 235 C/C					
7 7/8	4 1/2	1717	500 Hal lite + 200 S					
			50/50 Poz					

V. 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 (or allow-
able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 11-29-85	Date of Test 11-30-85	Producing Method (Flow, Pump, etc.) Pumping	Pest ID-2 1-3-86 Comp + BK
Length of Test 24 Hours	Tubing Pressure 20'	Casing Pressure 20	
Actual Prod. During Test	Oil-Bbls. 80	Water-Bbls. 0	
		Gas-MCF 48	

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (Flow, etc.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size

VI. 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.

[Signature]
Productive
12 **285**

OIL CONSERVATION COMMISSION

APPROVED **DEC 27 1985**, 19____
 BY _____ Original Signed By
 TITLE **Les A. Clements**

This form is to be submitted in accordance 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 change of condition.
 Separate Forms C-104 must be filed for each pool in multiply completed wells.