

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

JUN 13 1983

O. C. D.
ARTESIA, OFFICEREQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
REGISTRATION OFFICE	
Operator	

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

Reason(s) for filing (Check proper box)

New Well ☐
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

CHANGE PHYSICAL OPERATOR

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name SR LG - UNIT Well No. 40 Pool Name, including Formation Red Lake Grayburg Kind of Lease STATE Lease No. 26869Location Unit Letter G : 1450 Feet From The NORTH Line and 2197 Feet From The EASTLine of Section 2 Township 18 SOUTH Range 27 EAST, NMPM, Eddy County

SIGNATURE 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)Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)Well produces oil or liquids, ☐ Unit ☐ Sec. ☐ Twp. ☐ Rge. ☐ Is gas actually connected? ☐ When ☐
or location of tanks.

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

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE
ON 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.
		Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Sealing Method (pilot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-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. ClementsTITLE Supervisor District II

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.

Separate Form C-104 must be filed for each pool in multiply completed wells.