

OIL CONSERVATION DIVISION

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

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O. C. D.
ARTESIA OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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INSTRUCTIONS	
SANTA FE	☒
FILE	☒
USUB.	
LAND OFFICE	
TRANSPORTER	☒
OIL	☒
GAS	☒
OPERATION	
PRODUCTION OFFICE	

Operator
Delmar W. Berry

Address
2401 Loma Drive, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Toomey Allen	Well No. #18	Pool Name, Including Formation Artesia Queen GR SA	Kind of Lease State, Federal or Fee State	Lease N OG-647
Location Unit Letter I : 1650 Feet From The South Line and 330 Feet From The East Line of Section 28 Township 18S Range 28E, NMPM, Eddy Count				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Drawer 175, Artesia, New Mexico 88210
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	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 I Sec. 28 Twp. 18S Rge. 28E	Is gas actually connected? No When

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

COMPLETION DATA

Designate Type of Completion - (X) XX	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Re
Date Spudded 6-5-83	Date Compl. Ready to Prod. 6-21-83	Total Depth 2853'	P.B.T.D. None					
Elevations (DF, RKB, RT, GR, etc.) 3552' GR	Name of Producing Formation San Andres	Top Oil/Gas Pay 2098'	Tubing Depth 2176'					
Perforations 2098', 99, 2100, 01, 03, 04, 05, 07, 08, 11, 12, 13, 14, 15, 18, 2119'			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
10 3/4"	8 5/8", 24#	563'	350 SXS
7 7/8"	5 1/2", 15, 5#	2850'	650 SXS
	2 3/8"	2176'	

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 6-21-83	Date of Test 7-5-83	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size Post ID-2 7-15-83 6" comp + BK
Actual Prod. During Test 33	Oil-Bbls. 31	Water-Bbls. 2	Gas-MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (lb/in ²)	Casing Pressure (lb/in ²)	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.

Agent
7-7-83

OIL CONSERVATION DIVISION
JUL 14 1983
APPROVED
BY
TITLE OIL AND GAS INSPECTOR

This form is to be filled in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, or tubing, etc., or other such change of conditions.
Separate Form C-104 must be filled for each pool in multi-