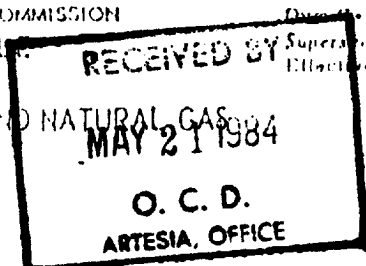


DISTRIBUTION	
SANPA PR	☒
FILE	☒
U.S.G.S.	☐
LAND OFFICE	☐
TRANSPORTER	☒
OPERATOR	☒
PRODUCTION OFFICE	☐

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



Operator Ray Westall
Address P.O. Box 4 Loco Hills, New Mexico 88255

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

If change of ownership give name
and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name <u>Denton Federal</u>	Well No. <u>8</u>	Pool Name, including Formation <u>San Andres Wildcat</u>	Kind of Lease State, Federal or Fed. <u>Fed. LC-067132</u>
Location Unit Letter <u>0</u> <u>930</u> Feet From The <u>South</u> Line and <u>2000</u> Feet From The <u>East</u> Line of Section <u>21</u> Township <u>18S</u> Range <u>29E</u> <u>NMDA</u> <u>Eddy</u> Co.			

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil (X) or Condensate () <u>Navajo Crude Oil Purchasing Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Drawer 159 Artesia, NM 88210</u>	
Name of Authorized Transporter of Casinghead Gas (X) or Dry Gas () <u>Phillips Petroleum Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Bartlesville, OK 74004</u>	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	<u>0</u>	<u>21</u>
	<u>18S</u>	<u>29E</u>
	<u>No</u>	<u>ASAP</u>

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

COMPLETION DATA

Designate Type of Completion - (X) (X)	Oil Well	Gas well	Flow well	Workover	Deepen	Plug Back	Same as last	Drill
Date Spudded <u>1-19-84</u>	Date Compl. Ready to Prod. <u>5-1-84</u>	Total Depth <u>3491'</u>	P.R.T.D.					
Elevations (DF, RKB, RT, GR, etc.) <u>3471. GR</u>	Name of Producing Formation <u>Loco Hills</u>	Top Oil/Gas Pay <u>Queen 1998 2376</u>	Tubing Depth <u>2650'</u>					
Perforations <u>3138-42, 3156-64, 3172-76 (1shot per foot, 16 holes)</u> <u>2392-2412, 2440-50</u>	Depth Casing Shoe <u>3489' 3491'</u>							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>12 1/4"</u>	<u>8 5/8"</u>	<u>350'</u>	<u>300 sx Class C, 2% CC</u>
<u>7 7/8"</u>	<u>5 1/2"</u>	<u>3489'</u>	<u>500 sx</u>
	<u>2 3/8"</u>	<u>2650'</u>	

TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

(Test must be after recovery of initial flow of load oil and must be equal to or exceed top
able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks <u>5-1-84</u>	Date of Test <u>5-15-84</u>	Testing Method (Pilot, pump, gas lift, etc.) <u>Pump</u>	Post TD-2 <u>6-8-84</u> <u>Comp. BK</u>
Length of Test <u>24 hrs</u>	Tubing Pressure <u>0</u>	Casing Pressure <u>20</u>	Choke Size <u>40</u>
Actual Prod. During Test <u>50</u>	Oil Prod. <u>40</u>	Water Prod. <u>20</u>	Gas-MCF <u>40</u>

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Boiler Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.

Ray Westall
(Signature)

Operator

5-18-84

OIL CONSERVATION COMMISSION

MAY 31 1984

APPROVED _____, 19 ____

Original Signed By
Ledie A. Clements
Supervisor District II

TITLE _____

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

If this is a request for allowable for a newly drilled or der
well, this form must be accompanied by a tabulation of the tes
taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for
able on next and completed wells.

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