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

Form C-114
Supersedes Old C-104 and C-
Effective 1-1-51

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FEB 04 '88

Operator Steve Sell <input checked="" type="checkbox"/>		O. C. O. ARTESIA OFFICE
Address P. O. Box 5061, Midland, Texas 79704		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Cal-Mon State	Well No. 5	Pool Name, including Formation Loco Hills Artesia-O-GR-SA	Kind of Lease State, Federal or Fee State	Lease No. G-4524
Location Unit Letter M ; 467 Feet From The South Line and 467 Feet From The West Line of Section 16 Township 18S Range 29E , NMEM, 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"/> Phillip Petroleum	Address (Give address to which approved copy of this form is to be sent) P. O. Box 791, Midland, Texas 79702					
Name of Authorized Transporter of Casinghead Gas <input checked="" 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 L	Sec. 16	Twp. 18S	Rge. 29E	Is gas actually connected? Yes	When 1-15-88

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 Rest. <input type="checkbox"/>	Diff. Rest. <input type="checkbox"/>
Date Spudded 11-11-87	Date Compl. Ready to Prod. 1-13-88		Total Depth 2833'		P.B.F.D. 2784'			
Elevations (DF, RKB, RT, GR, etc.) 3544' Grd.	Name of Producing Formation Queen Grayburg		Top Oil/Gas Pay Queen		Tubing Depth 2694'			
Perforations 2671-77', 2255-60', 2473-80', 2581-83', 2598-2600' w/36					Depth Casing Shoe 2833'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/2"	CASING & TUBING SIZE 8 5/8" 24#		DEPTH SET 332'		SACKS CEMENT 250 sxs. "C"			
7 7/8"	5 1/2" 15.5#		2833'		375 sxs. Halliburton Lite w/8# salt and 1/4# FloCele w/6#			
2 7/8		2694		salt and 2% CER-3 Port ED-2				

IV. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equivalent for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 1-15-88	Date of Test 1-31-88	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure N/A	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 80	Water - Bbls. 5	Gas - MCF 110

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

Bucky Olson
(Signature)
Agent
(Title)
2-4-88
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 9 1988, 19
BY Original Signed By
Mike Williams
TITLE Oil & Gas Inspector

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 deviated 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 Sections I, II, III, and VI for changes of ownership, name of well, or transporter or other such change of conditions.