

NEW MEXICO OIL CONSERVATION COMMISSION

POTENTIAL TEST AND REQUEST FOR ALLOWABLE
AND/OR

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator	MAXWELL OIL COMPANY
Address	2017 Continental National Bank Building, Fort Worth, Texas - 76102
REASON (S) FOR FILING (Check proper box)	
Change in Transporter (Check One)	
OIL <input type="checkbox"/> DRY GAS <input type="checkbox"/>	New Well <input type="checkbox"/>
CASINGHEAD GAS <input type="checkbox"/> CONDENSATE <input type="checkbox"/>	Other (Explain) <input type="checkbox"/>
	Re-completion <input type="checkbox"/>
	Change in Ownership <input type="checkbox"/>
	Show Gas Transporter - Change of Lease Name and Well Number from A C Taylor B # 2

DESCRIPTION OF WELL AND LEASE			
Lease Name	Well No.	Pool Name, Including Formation	County
Taylor Unit	14	Shugart Field - Queen	Eddy
Location			
UNIT LETTER E 1980 FEET FROM THE North LINE AND 660 FEET FROM THE West			
LINE OF SECTION 13 TOWNSHIP 18S RANGE 31E NMPM.			

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
Transporter: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Condensate	Transporter: <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Casinghead Gas						
Name: Texas-New Mexico Pipe Line Company	Name: Phillips Petroleum Company						
Address: P. O. Box 1510 Midland, Texas	Address: Frank Phillips Building Bartlesville, Oklahoma						
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 12	Twp. 18S	Rge. 31E	Is Well Actually Connected? Yes	When	Unknown

If this production is commingled with that from any other lease or pool, give Commingling Order No. _____

COMPLETION DATA									
Designate Type Of Completion - (X)									
<input checked="" type="checkbox"/> Oil Well	<input type="checkbox"/> Gas Well	<input type="checkbox"/> New Well	<input type="checkbox"/> Workover	<input type="checkbox"/> Deepen	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Same Res'v.	<input type="checkbox"/> Diff. Res'v.		
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
Pool	Name of Prod. Formation		Top Oil/Gas Pay		Tubing Depth				
Perforations					Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				

TEST DATA			
OIL WELL			
Date of first prod.	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test *	Oil - Bbls.	Water - Bbls.	Gas - MCF

* Prod. after recovery of total volume of load oil and must exceed normal unit allowable or test must be for full 24 hrs.

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method - (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

CERTIFICATE
I hereby certify that the information given above is true and complete to the best of my knowledge and belief, and further certify, that the rules and regulations of the Oil Conservation Commission have been complied with.

Joseph D. Kennedy (Signature)
Secretary-Treasurer
(Title)
June 13, 1967
(Date)

OIL CONSERVATION COMMISSION
APPROVED _____, 19____
BY W. A. Gressett
TITLE OIL AND GAS INSPECTOR

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.
This form must be filled out completely for allowable on new and re-completed wells.
Fill out Sections I, II and III for change of owner, well name, transporter or other change of condition.

OIL CONSERVATION COMMISSION

ARAPAHO DISTRICT OFFICE

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gas 1
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