

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

NOV 30 1982

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

1. OPERATOR	
Westall - Mask	
Address	
Box 1477 - Roswell, New Mexico 88201	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain) Effective 12/1/82	
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE				
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
State	1	Shugart	State, Federal or Fee State	E60172
Location				
Unit Letter	C	Feet From The North Line and	Feet From The	
Line of Section	2	Township	Range	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Navajo Crude Oil Purchasing Co.	P. O. Box 175, Artesia, New Mexico 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips Petroleum	8 Adams Bldg., Bartlesville, OK 74004					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	C	2	19	31		
If this production is commingled with that from any other lease or pool, give commingling order number:						

IV. COMPLETION DATA								
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing 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			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bble.	Water-Bble.	Gas-MCF

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

VI. 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.	
Garth R. Westall (Signature)	
Co-Owner	(Title)
11/30/82	(Date)
OIL CONSERVATION DIVISION	
APPROVED DEC 02 1982	
BY Original Signed By	
Leslie A. Clements	
TITLE 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 deviate 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 Forms C-104 must be filed for each pool in multiple completed wells.	