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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

30-015-10592
RECEIVED

Operator V. S. WELCH		AUG 12 1965	
Address DRAWER W - ARTESIA, NEW MEXICO		O. C. C. ARTESIA, OFFICE	
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 checked="" 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name HINKLE P	Well No. 3	Pool Name, Including Formation SHUGART	Kind of Lease State, Federal or Fee FEDERAL
Location Unit Letter C ; 990' Feet From The NORTH Line and 1980' Feet From The WEST Line of Section 27 , Township 10S Range 31E , NMPM, 58N 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"/> McNEED CORPORATION	Address (Give address to which approved copy of this form is to be sent) 2003 WILCO BUILDING		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS PETROLEUM Co.	Address (Give address to which approved copy of this form is to be sent) MIDLAND, TEXAS		
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 27	Twp. 10S Rge. 31E
Is gas actually connected?		When 8/4/65	

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5/20/65	Date Compl. Ready to Prod. 8/4/65	Total Depth 3976		P.B.T.D. 3960					
Pool SHUGART	Name of Producing Formation GRAYBURG	Top Oil/Gas Pay 3908		Tubing Depth 3900					
Perforations 3908 to 3926		Depth Casing Shoe 3971							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
	8-5/8"		870 FT.		50				
	5-1/8"		3971		150				
	2" TUBING		3900						

V. 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)

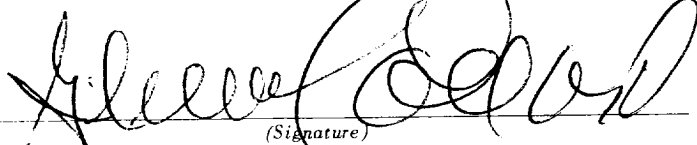
Date First New Oil Run To Tanks 8/4/65	Date of Test 8/4/65	Producing Method (Flow, pump, gas lift, etc.) PUMP	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls. 53 BBLs. SWAB	Water-Bbls.	Gas-MCF

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

VI. 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.


(Signature)

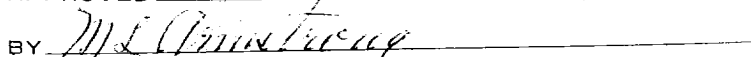
AGENT

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED **AUG 12 1965**, 19

BY 

TITLE **OIL AND 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 deviation 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 only 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 multiply completed wells.