

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL /
	GAS /
OPERATOR	/
PRORATION OFFICE	

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

RECEIVED

MAY 29 1978

Operator	Shenandoah Oil Corporation	O. C. C. ARTERIA, OFFICE
Address	P. O. Box 4534 - Odessa, Texas 79760	
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

DESCRIPTION OF WELL AND LEASE

Lease Name Shugart "D"	Well No. 12	Pool Name, Including Formation Shugart (Y., S.R., Qn., Gr.)	Kind of Lease State, Federal or Fee Fed.	Lease No. LC029387(b)
Location				
Unit Letter F	2310	Feet From The West	Line and 1650	Feet From The North
Line of Section 30	Township 18S	Range 31E	NMPM, Eddy	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Texas-New Mexico Pipeline Co.	Box 1510, Midland, Texas 79701
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)
Phillips Petroleum Company	Box 6666, Odessa, Texas 79760
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	F 30 18S 31E Yes 5-18-78

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

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 Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 4-28-78	Date Compl. Ready to Prod. 5-18-78	Total Depth 3839'	P.B.T.D. 3833'					
Elevations (DF, RKB, RT, GR, etc.) 3614 GR.	Name of Producing Formation Penrose & Grayburg	Top Oil/Gas Pay 3395'	Tubing Depth 3780'					
Perforations Penrose: 3400'-3410' & 3416'-3424 - 2 JSPP Grayburg: 3748'-3752' & 3764'-3778' - 2 JSPP			Depth Casing Shoe 3839'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8 5/8" - 24# - H-40	728	350
7 7/8"	5 1/2" - 14# - K-55	3839	1330
5 1/2"	2 3/8" - 4.7# - K-55	3780	

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 5-18-78	Date of Test 5-20-78	Producing Method (Flow, pump, gas lift, etc.) Pumping - 1 25/32" Tubing Pump	
Length of Test 24 Hr.	Tubing Pressure --	Casing Pressure --	Choke Size --
Actual Prod. During Test 224	Oil-Bbls. 124 B. O.	Water-Bbls. 100 Load	Gas-MCF 90

GAS WELL

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

C. M. Downey, Jr.
W. Downey, Jr. (Signature)
Manager - West Texas-New Mexico Division
(Title)
May 22, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN - 1 1978
BY W. A. Gressett
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 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 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 multiply