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

Form C-104
Superseding Old C-104 and C-11
Effective 1-1-65

JAN 2 1979

O. C. C.
ARTESIA, OFFICE

Operator Westall - Mask ✓		
Address Drawer 1477, Roswell, New Mexico 88201		
Reason(s) for filing (Check proper box)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of Oil <input type="checkbox"/>	Other (Please explain) CASINGHEAD GAS MUST NOT BE FLARED AFTER 12/27/78 ✓
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	UNLESS AN EXCEPTION TO IS OBTAINED
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	
	Dry 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 Keohane ²⁴ Federal	Well No. 1-1	Pool Name, Including Formation Shugart 4-SR-Q-G	Kind of Lease State, Federal or Fee Federal	Lease No. NM-025777
Location				
Unit Letter O	2,310	Feet From The East	Line and 330'	Feet From The South
Line of Section 24	Township 18S	Range 31E	NMPM, Eddy	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"/> Navajo Crude Oil Purchasing Company	Address (Give address to which approved copy of this form is to be sent) Drawer 175, Artesia, New Mexico 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Continental Oil Company	Address (Give address to which approved copy of this form is to be sent) Ponca City, Oklahoma 74101	
If well produces oil or liquids, give location of tanks.	Unit O	Sec. 24
	Twp. 18S	Rge. 31E
	Is gas actually connected? No	

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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Hole <input type="checkbox"/>	Diff. Reelv. <input type="checkbox"/>
Date Spudded 11/30/78	Date Compl. Ready to Prod. 12/27/78		Total Depth 4,200'		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 3689.5 Gr.	Name of Producing Formation Grayburg		Top Oil/Gas Pay 3785		Tubing Depth			
Perforations 3,785 (6 Holes) 4,075 (3 Holes) 4,135 (3 Holes)					Depth Casing Shoe 4200			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8 5/8 20#		685'		300			
7 7/8"	4 1/2 9 1/2#		4218' 4200		365			

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 12/27/78	Date of Test 12/27/78	Producing Method (Flow, pump, gas lift, etc.) Pump Ideco MM 600	
Length of Test 24 Hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 40	Oil - Bbls. 40	Water - Bbls. 20	Gas - MCF TSM

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

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.

G. A. Mask
(Signature)
(Agent) Co-Owner
(Title)
12/29/78
(Date)

OIL CONSERVATION COMMISSION
JAN 3 1979
APPROVED _____, 19____
BY W. A. Gross
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 change of owner, well name or number, or transporter, or other such change of condition.



KENNETH D. REYNOLDS - ARTESIA
LESLIE K. EVERTSON - ROSWELL

DRILLING CO., INC. - OIL WELL DRILLING CONTRACTORS

P. O. Box 2055 ROSWELL, NEW MEXICO 88201
TELEPHONES: ARTESIA 505/746-6757
ROSWELL 505/623-5070

December 11, 1978

Westall & Mask
P.O. Drawer 1477
Roswell, New Mexico 88201

Re: Keohane ^{29'} ~~24'~~ - #1

Gentlemen:

The following is a Deviation Survey of the above well located in Eddy County, New Mexico:

497' - 1/2°
846' - 1/2°
1005' - 1/2°
1497' - 3/4°
1905' - 3/4°

2394' - 3/4°
2882' - 1°
3370' - 1 1/4°
3850' - 1 1/4°
4200' - 1°

Yours very truly,

WEK DRILLING CO., INC.

Arnold Newkirk

STATE OF NEW MEXICO)
COUNTY OF CHAVES)

The foregoing was acknowledged before me this 11th day of December, 1978 by Arnold Newkirk.

My Commission Expires:

April 9, 1980

Notary Public

RECEIVED

JAN 2 1979

O. C. C.
ARTESIA, OFFICE