* * * * * * TE C VED	i	٦					<u></u>		
DISTRIBUTION	- † 	-							
SANTA FE	- . -	7		NEW MEX	ICO OIL	CONSERVATION COM	Mission	Form C-10	4
FILE	1 +	_		R	REQUEST	FOR ALLOWABLE		Supersede	Old C-104 and C-11
U.S.G.S.	+ +	٦,	LITUO	2171716		AND		Effective	1-1-65
LAND OFFICE	++	-	NU I HUI	RIZATIO	1 10 TR	ANSPORT OIL AND			
TRANSPORTER OIL	III							RECEIVED	
GAS									
OPERATOR							Alia	i 1 9 1981	
PRORATION OFFICE							1.00	1 1 9 198 1	
Operator							0	C. D.	
Cook Oil and G	as Pro	ductio	n Co.	_/			ARTES	IA, OFFICE	
								A. OFFICE	
P. O. Box 159,	Roswe	ll, Ne	w Mex	$i\infty$ 8	8202-0	159			,
Reason(s) for filing (Check	proper bo	x)				Other (Pleas	se explain)		
New Well		Ch	ange in 7	Transporter	of;				
Recompletion		Oil	l		Dry G	as 🔲			
Change in Ownership		Ca	singhead	Gas	Conde	nsate			
If change of ownership gi and address of previous o	ve name wner								
I. DESCRIPTION OF WE	LL AND								
Lease Name State			1	ool Name, I			Kind of Lease		Lease No.
			-Y	Shuga	irt y	SR-Q-G	State, Federal	or Fee State	2678
Location					7				
Unit Letter P	.:9	1 <u>90</u> Fe	et From '	The <u>Eas</u>	tLir	• and 960	Feet From T	he South	
Line of Section 2	То	wnship	19 S		Range	31 E , NMPM	, Eddy		County
. DESIGNATION OF TRA	NSI OR	TER OF	OIL A	ND NATI	IRAL GA	S			_
Name of Authorized Transpo	rter of Oil	2 2 2	or Cond	ensate 🔲	-	Address (Give address	to which approv	ed copy of this form i	s to be sent!
Navajo Crude Oi		-				Box 175, Artes			
Name of Authorized Transpo	rter of Car	singhead C	as 🔀	or Dry Go	ıs 🗀	Address (Give address	to which approv	ed copy of this form i	
Conoco						Ponca City, Ok		•	
If well produces oil or liquid	8,	Unit	Sec.	Twp.	Rge.	Is gas actually connecte		1	
give location of tanks.		! 1	; 2	19 S	31 E	485	i	Wistai	1

If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA OII Well Gas Well Deepen Workover Plug Back Same Res'v. Diff. Res'v. Designate Type of Completion - (X) Х Date Spudded Date Compl. Ready to Prod. Total Depth May 21, 1981 6/10/81 4300' 4295 Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Queen/Grayloung Top Oil/Gas Pay Tubing Depth 4300 3580'SA 3382 Perforations 3382-3386 -3 holes Depth Casing Shoe 3408-346**5** - 17 holes 4300' BA TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 11" 8 5/8 742 -750 300 sacks circulated E. 7 7/8" 5 1/2 4295 430c 500cc 50/50 Pos 6# Salt 2 3/8 3580 100 class c 2% CC circ. top of cement 2300' by V. TEST DATA AND REQUEST FOR ALLOWABLE

(Test must be after recovery of total volume of load oil and apple states or exceed top allowable for this depth or be for full 24 hours) OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) 7. 1. 6/12/81 6/14/81 Pumping Length of Test Casing Pressure Tubing Pressure Choke Size 24 100 Open Actual Prod. During Test Oil - Bbls. Water - Bbls. SO 85 65 20

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		

I.	CERTI	FICA	TE	OF	COMP	LIANCE
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I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given

a 1	ove is true and complete to the best of my knowledge and belief.
)	۸ _
L	Declarate
_	(Signature)
_	Suckedan
	J (Title)
	3/12/41

(Date)

OII	CONSER	VATION	COMMISSI	A

APPROVE	AUG 1 9 1981	, 19
BY	W.a. Gresset	
TITLE	SUPERVISOR, DISTRICT IL	

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.