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PRODUCTION OFFICE	
REGULATOR	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Bel-Dyn, Inc. Properties ✓

Address

P.O. Box 136 Lovington, New Mexico 88260

Reason(s) for filing (Check proper box)

New Well ☒
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Hale Federal	1	Shugart-Queen, 7 Rivers	State, Federal or Fee Fed.	0560353

Location

Unit Letter K : 1980 Feet From The S Line and 1980 Feet From The W

Line of Section 1 Township 19S Range 30E, NMPM, Eddy County

SIGNATION 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)
Conoco, Inc.	4708 Andrews Highway, Odessa, Texas 79762
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	Phillips Bldg., Odessa, Texas 79762
well produces oil or liquids, or location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
K 1 19S 30E	No

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
X	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
7-13-82	7-21-82	3500'	3480'					
Locations (DF, HKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3523 G.R.	Yates- 7 R. Queen, Penn.	Queen: 3090'	3170'					
Iterations			Depth Casing Shoe					
3097-3216 (16 holes)								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8 5/8" 20#	618	250 Halliburton Lite
			200 Class C
7 7/8	5 1/2" 15.5#	3480	550 Lite
			300 Class C

TEST DATA AND REQUEST FOR ALLOWABLE
LEVEL 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	POSTED-82 10-1-82 COMPL-23H ID-2 X
9-2-82	9-3-82	Rod Pump	
Length of Test	Tubing Pressure	Casing Pressure	
24	40	200	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Choke Size
74	74	40	2" X
			Gas-MCF
			66

TEST 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

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 is true and complete to the best of my knowledge and belief.

(Signature)

Operator/Manager

(Title)

9-23-82

(Date)

OIL CONSERVATION DIVISION

SEP 30 1982

APPROVED _____, 19

BY _____
Original Signed By
Leslie A. Clements
Supervisor District II

TITLE _____

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 conditions.

Separate Form C-104 must be filed for each pool in multiple-completed wells.