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TRANSPORTER	OIL
	GAS
OPERATOR	
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OIL CONSERVATION DIVISION

SANTA FE, NEW MEXICO 87501

O. C. D.

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED BY

NOV 04 1983

O. C. D.
ARTESIA, OFFICE

Westall-Mask

Address
P.O. Drawer 1477 Roswell, New Mexico 88201

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☐ Casinghead Gas ☐ Condensate ☐

Change in Ownership ☐

(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.
Hinkle "B" Federal	19	Shugart-Y-SR-Q-G	State, Federal or Fee Federal	LC-02936

Location

Unit Letter D : 330' Feet From The West Line and 990' Feet From The North

Line of Section 34 Township 18S Range 31E , NMPM, Eddy County

DESIGNATION 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)
Navajo Crude Oil Purchasing Company	P.O. Drawer 175 Artesia, New Mexico 88210
Name of Authorized Transporter of Casinghead Gas <input 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	4001 Penbrook Odess, Texas 76761

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	34	18S	31E		Yes	10-10-83

(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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
	X		X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
8-18-83	10-13-83	4200'	N/A

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3618.9 GR	Grayburg	3786	3760'

Perforations	Depth Casing Shoe
3786 - 3902 (25 Holes)	4200'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8 5/8"	657'	400 sx Class C 2% CCL
7 7/8"	4 1/2"	4200'	630 sx pacsetter lite
	2 3/8"	3760'	plus 10#SK salt plus
			A.F.S., 300 sx 50/50 i
			C plus .6% C.F. 9 plus
			KCL Plug Down

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	Choke Size
10-10-83	10-13-83	2 X 1/2 X 2 X 12 RWTC Pump	N/A

Length of Test	Tubing Pressure	Casing Pressure	Gas-MCF
24 Hours		1900	1CF

Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	
25	25	10	

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

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

Richard E. Barton
Richard E. Barton
Trustee of the Jack Mask Trust
(Title)

10-20-83

OIL CONSERVATION DIVISION

APPROVED NOV 28 1983, 19
Original Signed By
BY Leslie A. Clements
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 deviated tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own