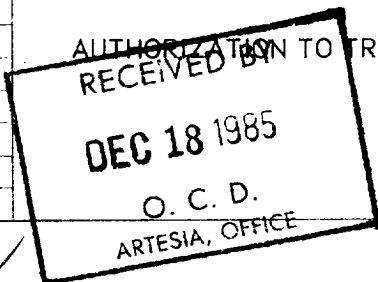


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SANTA FE		✓
FILE		✓
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LAND OFFICE		✓
TRANSPORTER	OIL	✓
	GAS	✓
OPERATOR		✓
PRORATION OFFICE		✓

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



I.

Operator  
Westall - Mask ✓  
Address  
P.O. Drawer 1477 Roswell, New Mexico 88201

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Keohane 24 Federal	Well No. #2	Pool Name, including Formation Shugart Y-SR-Q-G	Final Status Producing
Location Unit Letter <u>H</u> ; 2310' Feet From The <u>south</u> Line and 2200' Feet From The <u>East</u> Line of Section 24 , Township 18S Range 31E , NMPM, Eddy			

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	Address (Give address to which approved copy of this form) P.O. Drawer 175 Artesia, N.M.				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum	Address (Give address to which approved copy of this form) 4001 Penbrook Odessa, Texas 76601				
If well produces oil or liquids, give location of tanks.	Unit 24	Sec. 18S	Twp. 31E	Rge. yes	Is gas actually connected? 12-78

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"/>
Date Spudded 10-18-85	Date Compl. Ready to Prod. 12-16-85	Total Depth 4500'	N/A		
Pool Shugart	Name of Producing Formation Grayburg	Top Oil/Gas Pay 4266	4360		
Perforations 4266-4338 20 holes					
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
12 1/2	8 5/8	687	410Sx class C		
7 7/8	4 1/2	4496	550 Sx 50/50 po		
	2 3/8	4360	320 Sx class C		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of lead oil and must be conducted for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 12-11-85	Date of Test 12-11-85	Producing Method (Flow, pump, gas lift, etc.) 2X1/2X2X12 RWTC Pump
Length of Test 24 hours	Tubing Pressure	Casing Pressure 20#
Actual Prod. During Test 30	Oil-Bbls. 30	Water-Bbls. 20

Post ID-2  
1-3-86  
Comp + AK

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity (lb./cu. ft.)
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Throttle 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.

Richard E. Barton

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

12-16-85  
(Date)

OIL CONSERVATION COMMISSION

DEC 30 1985

APPROVED  
BY Original Signed By  
Les A. Clements  
TITLE Supervisor District II

This form is to be filed in compliance with RULE 11.3.  
If this is a request for allowable for a newly drilled well, this form must be accompanied by a tabulation of the tests taken on the well in accordance with RULE 11.1.

All sections of this form must be filled out completely on new and recompleted wells.

Fill out Sections I, II, III, and VI only for new wells, well name or number, or transporter, or other such changes.

Separate Forms C-104 must be filed for each pool or recompleted wells.