9-22-87 Litho-Cyberlok 1200 - 2852 CN-LD/GR O - 2879 Dual Haterolog/GR 1200-2897 Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

RECEIVED

Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

OCT 18'90

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	Brazos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATIONARTESIA, OFFICE											
I	TO TRANSPORT OIL AND NATURAL GAS								ell API No.			
Operator THE EASTLAND OIL COMPANY								30-015-25795				
Address		TV 70	702									
P. O. DRAWER 3488, M Reason(s) for Filing (Check proper box)	LDLAND	, 17 /9	702		Oth	er (Please expl	ain)					
New Well		Change in	Transp	orter of:								
Recompletion	Oil	_	Dry G	_	PPPC7	TIVE OO/O	1/00					
Change in Operator			Conde			TIVE 09/0						
If change of operator give name and address of previous operator FRE	D POOL	DRILLI	NG,	INC., P	. O. BOX	(1393, R	OSWELL,	NM 8820	<u> </u>			
II. DESCRIPTION OF WELL	AND LE	EASE								ease No.		
Lease Name P.J. "A" STATE	Well No. Pool Name, Including TURKEY TR				ACK QUEEN EAST State, 4			of Lease Federal Por Fee	B7717			
Location Unit Letter K	_ :	2310	_ Feet F	rom The	OUTH Lin	e and) Fe	et From The _	WEST	Line		
Section 1 Townshi	, 19S		Range	29E	, N	мрм,	<u>,</u>	EDD	Y	County		
III. DESIGNATION OF TRAN	SPORT	ER OF O	IL AN	ID NATU	RAL GAS			- Cali - C	is to be se			
Name of Authorized Transporter of Oil X or Condensate						ve address to wi BOX 159,	hich approved ARTESTA	<i>сору ој тиз ја</i> . NM 882	10	nu)		
NAVAJO REFINING CO. Name of Authorized Transporter of Casinghead Gas X or Dry Gas						ve address to wi	hich approved	copy of this fo	erm is to be se	:n/)		
Name of Authorized Transporter of Casinghead Gas X or Dry Gas PHILLIPS PETROLEUM CO.					P. O.	BOX 5050,	BARTLE	SVILLE,	OK 74005	5		
If well produces oil or liquids,	Unit K	Sec. 1	Twp.	Rge. 5 29E		ly connected? ES	When	7 10/01/87				
f this production is commingled with that	from any o	ther lease or	pool, gi	ve comming	ling order num	iber:						
IV. COMPLETION DATA		louw.		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion	- (X)	Oil Well	' i	Gas Well	New Well	WORKOVE	Julyan		İ	_i		
Date Spudded		npi. Ready to	o Prod.		Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth				
Perforations								Depth Casing Shoe				
									 			
	TUBING, CASING AND							SACKS CEMENT				
HOLE SIZE	CASING & TUBING SIZE				ļ	DEPTH SET		SACIO GEMENT				
V. TEST DATA AND REQUES	T FOR	ALLOW	ABLE	ail and must	he equal to or	r exceed top all	owable for thi	s depth or be j	for full 24 hou	vrs.)		
OIL WELL (Test must be after recovery of total volume of load oil and must Date First New Oil Run To Tank Date of Test						Producing Method (Flow, pump, gas lift, etc.) Casing Pressure Choke Size 10-26-90 Water - Bbls. Gas-MCF Choke OP						
e First New Oil Run 10 Tank Date of Test								16 1.65	poste	d ID-2		
Length of Test	Tubing Pressure				Casing Press	nue		Choke Size	10-2	6-90		
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas- MCF	E.hg	OP		
C · C VVIDY I	<u></u>				L			J				
GAS WELL Actual Prod. Test - MCF/D	Length of	Test			Bbls. Conder	nsate/MMCF		Gravity of C	Condensate			
								Choke Size				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Cloke Size				
VI. OPERATOR CERTIFIC	ATE O	F COMP	PLIAI	NCE			NSERV.	ATION	DIVISIO	NC		
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.					Date Approved OCT 2 3 1990							
Junis Russ					Date	Applove						
					By_	By - ONGINAL SIGNED BY						
TRAVIS REED PRODUCTION SUPERINTENDENT Title					Title Supervision 18							
Printed Name 10/09/90	9	15/683-	-6293		''''e	 >urt.r.	VIII., 2/.	27.431 1				
Date		Tele	phone l	No.	11							

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.