

STATE OF NEW MEXICO
OIL AND MINERALS DEPARTMENT

RECEIVED

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

JUN 05 '89

REQUEST FOR ALLOWABLE
AND

ARTESIAN AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Santa Fe			
File			
Transporter	Oil		
Operator	Gas		

BARBER OIL, INC.

P. O. BOX 1658 CARLSBAD, NM 88221-1658

Reason(s) for filing (Check proper box)

New Well ☐

Recompletion ☐

Change in Ownership ☐

Change in Transporter of:

Oil ☒

Casinghead Gas ☐

Dry Gas ☐

Condensate ☐

Other (Please explain)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name

STOVALL-WOOD

Well No.

2

Pool Name, Including Formation

BARBER-YATES

Kind of Lease

State, Federal or Fee FEE

Lease

Section F : 2310 Feet From The NORTH Line and 2310 Feet From The WEST

Line of Section 20 Township 20S Range 30E , NMPM, EDDY

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐

Madco Purchasing Corp.

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐

NONE

Address (Give address to which approved copy of this form is to be sent)

6600 S. Yale Suite 1300 Tulsa, OK 74136

Address (Give address to which approved copy of this form is to be sent)

Well produces oil or liquids,
give location of tanks.

Unit E Sec. 20 Twp. 20S Rge. 30E

Is gas actually connected? NO

When

This production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)

Spudded ☐

Date Compl. Ready to Prod.

Total Depth

Sections (DF, RKB, RT, CR, etc.)

Name of Producing Formation

Top Oil/Gas Pay

Iterations

TUBING, CASING, AND CEMENTING RECORD				SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET			

TEST DATA AND REQUEST FOR ALLOWABLE

(Test must be after recovery of total volume of load oil and must be equal to or exceed to be able for this depth or be for full 24 hours)

Oil Well

First New Oil Run To Tanks

Date of Test

Producing Method (Flow, pump, gas lift, etc.)

Length of Test

Tubing Pressure

Casing Pressure

Actual Prod. During Test

Oil-Bbls.

Water-Bbls.

Gas Well

Actual Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MMCF

Producing Method (flow, back pr.)

Tubing Pressure (shut-in)

Casing Pressure (shut-in)

CERTIFICATE OF COMPLIANCE

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.

PRESIDENT

6/1/89

(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 6 1989

BY S. J. ...

TITLE S. J. ...

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or old well, this form must be accompanied by a tabulation of the 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 well name or number, or transporter, or other such change of data.
Separate Forms C-104 must be filed for each pool in recompleted wells.