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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
SEP 20 1976

Form C-104
Supersedes Old C-104 and C-111
Effective 1-1-65

O. C. C.
ARTESIA, OFFICE

I. Operator
Southern Union Production Company
Address
Suite 1700 Campbell Centre, Dallas, Texas 75206
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of: ☐
Recompletion ☒ No Entry Oil ☐ Dry Gas ☒
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
change from
SUG to LUG

If change of ownership give name and address of previous owner
~~Getty Oil Company's Wilson Federal #1~~

II. DESCRIPTION OF WELL AND LEASE

Lease Name Shelby Federal	Well No. 1	Pool Name, including Formation McKittrick Hills Strawn	Kind of Lease State, Federal or Fee Fed	Lease No. NM-12828
Location Unit Letter H ; 2310 Feet From The North Line and 990 Feet From The East Line of Section 13 Township 22-South Range 24 East , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
The Gas Company of New Mexico	Bob McCrary Suite 1800 1st International Bldg, Dallas, TX 75270					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					Yes	2/12/75

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
		XX			XX			
Date Spudded 9/12/73	Date Compl. Ready to Prod. 12/28/73	Total Depth 10,766'	P.B.T.D. 10,469					
Elevations (DF, RKB, RT, GR, etc.) GL 9100'	Name of Producing Formation Strawn	Top Oil/Gas Pay 9,094	Tubing Depth 9,336					
Perforations 9094-9100'	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
17-1/2"	13-3/8"	355		350				
11"	8-5/8"	3506'		1535				
7-7/8"	4-1/2"	10,508		570				

V. 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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
			PO SK ED 3 9-24-76

GAS WELL

Actual Prod. Test-MCF/D CAOF 400 MCFPD	Length of Test 3 hours	Bbls. Condensate/MMCF 0 bbls	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in) 925#	Casing Pressure (Shut-in) 1100#	Choke Size 1/4"

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.

Haskell Fleetwood (Signature)
Manager, Drilling and Production
September 17, 1976 (Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 21 1976
BY W. A. Gressett

TITLE 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 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 condition.

Separate Forms C-104 must be filed for each pool in multiply