

| | |
|------------------|-------|
| DISTRIBUTION | |
| SANTA FE | 1 |
| FILE | 1 |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL 1 |
| | GAS 1 |
| OPERATOR | 1 |
| PRORATION OFFICE | |

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

DEC 20 1979

O. C. D.
ARTESIA, OFFICE

| | |
|---|---|
| Operator DAVID FASKEN | |
| Address 608 First National Bank Building, Midland, Texas 79701 | |
| Reason(s) for filing (Check proper box) | |
| 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"/> |
| Other (Please explain) | |

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|---------------|---|--|------------------------|
| Lease Name Shell Federal Comm. | Well No. 5 | Pool Name, Including Formation Cemetery Morrow | Kind of Lease State, Federal or Fee Federal | Lease No. NM0207950 |
| Location | | | | |
| Unit Letter G ; 1835 Feet From The North Line and 1980 Feet From The East | | | | |
| Line of Section 5 Township 21-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 checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | |
| Navajo Crude Oil Purchasing Co. | Box 175, Artesia, NM 88210 | |
| 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) | |
| David Fasken | 608 First Nat'l Bank Bldg. Midland, TX | |
| If well produces oil or liquids, give location of tanks. | Unit G | Sec. 5 |
| | Twp. 21-S | Rge. 24-E |
| | Is gas actually connected? No | |
| | When 1-7-80 2-4-80 | |

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'v. | Diff. Res'v. |
| | | | X | X | | | | | |
| Date Spudded 4-18-79 | Date Compl. Ready to Prod. 10-22-79 | Total Depth 10,000' | | P.B.T.D. 9612' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3756.6' RKB | Name of Producing Formation Morrow | Top Oil/Gas Pay 9547' | | Tubing Depth 9392' | | | | | |
| Perforations 9547'-9564' w/32 holes, 9570'-9573' w/6 holes | | | | Depth Casing Shoe 10,000' | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 17-1/2" | | 13-3/8" 40 & 48#/ft | | 400' | | 350 Lite + 100 "C" | | | |
| 12-1/4" | | 8-5/8" | | 2999' | | 900 Lite + 200 "C" | | | |
| 7-7/8" | | 4-1/2" | | 10,000' | | 950 "H" | | | |

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 |

GAS WELL

| | | | |
|---|------------------------------------|-------------------------------------|------------------------------|
| Actual Prod. Test-MCF/D 644 | Length of Test 24 hrs | Bbls. Condensate/MMCF -0- | Gravity of Condensate --- |
| Testing Method (pitot, back pr.) Back pressure | Tubing Pressure (Shut-in) 1670# | Casing Pressure (Shut-in) Packer | 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.

Jimmy Davis Jr.
(Signature)
Jimmy Davis, Jr., Agent
(Title)

December 14, 1979

(Date)

OIL CONSERVATION COMMISSION

FEB 8 1980

APPROVED _____
BY _____
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 multiple