

Oil	☒
Gas	☒
Condensate	☒
Other	☐

HOWARD COUNTY COMMISSION
REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED BY
JUL 30 1984
O. C. D.
ARTESIA, OFFICE

Operator	TXO PRODUCTION CORP
Address	900 WILCO BLDG, MIDLAND, TX 79701
Reason(s) for filing (check proper box)	Change in Transporter of Oil ☐ Dry Gas ☒ Added Perfs Recompletion ☒ Oil ☐ Condensate ☐ Changed Test & Gas Transporter Change in Ownership ☐ Other (Please explain)
If change of ownership give name and address of previous owner	

DESCRIPTION OF WELL AND LEASE	
Lease Name	WILLIAMSON FEDERAL "A"
Well No.	3
Pool Name, including Formation	EAST BURTON FLAT (MORROW)
Kind of Lease	State, Federal or Fee FEDERAL
Lease No.	055477
Location	
Unit Letter	L
1980 Feet From The	SOUTH
Line and	660
Feet From The	WEST
Line of Section	16
Township	20 S
Range	29 E
NMCM	EDDY
County	

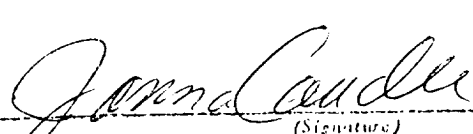
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
THE PERMIAN COPROPORTION	P.O. BOX 1183, HOUSTON, TX 77001
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
FARMLAND IND., INC.	P.O. BOX 7305 - DEPT. @, KANSAS CITY, MO.
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
L 16 20 S 29 E	YES 6-7-82

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

COMPLETION DATA	
Designate Type of Completion - (X)	Oil Well Gas Well New Well Workover Deepen Plug Back Same Restv. Diff. Rest
	X
Date Spudded	Date Compl. Ready to Prod.
1-7-82	6-27-84
Total Depth	P.D.T.D.
11,874	11,731
Elevations (Dr, RSE, RT, GR, etc.)	Name of Producing Formation
3273 GR, 3288 KB	MORROW
Top Oil/Gas Pay	Tubing Depth
11,412	11,644
Perforations	Depth Casing Shoe
11,703 - 11,716 11,412 - 11,500	11,788
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE
17 1/2	13 3/8
12 1/4	8 5/8
7 7/8	4 1/2
	2 3/8" tbg
DEPTH SET	SACKS CEMENT
570'	700
3195'	2500
11,876	300
11,644	

TEST DATA AND REQUEST FOR ALLOWABLE (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	Length of Test
2421	24 hrs
Gravity of Condensate	
62.0	
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)
BACK PRESSURE	3277
Casing Pressure (shut-in)	Choke Size
0	3/4

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.	
	
JANNA CAUDLE, ENGR. ASST.	
(Title)	
7-26-84	
(Date)	

OIL CONSERVATION COMMISSION	
JUL 31 1984	
APPROVED	19
BY	ORIGINAL SIGNED
	BY LARRY BROOKS
TITLE	GEOLOGIST - NMCCD
This form is to be filed in compliance with RULE 1104.	
If this be a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the well tests taken on the well in accordance with RULE 111.	
All sections of this form must be filled out completely for all wells or new and re-completed wells.	
Fill out only Sections I, II, III, and VI for changes of name, well name or number, of transporter, or other such change of conditions.	