

DISTRIBUTION
SANTA FE ✓
SLO ✓
U.S.G.S.
LAND OFFICE
TRANSPORTER OIL ✓
OPERATOR
PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
RECEIVED BY
JAN 7 1985
O. C. D.
ARTESIA, OFFICE

Amended

I.

Operator
MONSANTO OIL COMPANY ✓
Address
1300 One First City Center, Midland, Texas 79701
Reason(s) for filing (Check or explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain):

If change of ownership give name
and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE

Lease Name Burton Flat Deep Unit	Well No. 28	Pool Name, including Formation E. Avalon Bone Spring	Kind of Lease State, Federal or Fee	Lease No. L-6523
Location Unit Letter J ; 3100 Feet From The North Line and 1880 Feet From The East Line of Section 2 Township 21S Range 27E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ The Permian Corp	Address (Give address to which approved copy of this form is to be sent) PO Box 1183, Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Phillips Petroleum Corp	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, Texas 79762					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 2	Twp. 21S	Rge. 27E	Is gas actually connected? Yes	When 12/1/84

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 Restv. ☐	Diff. Restv. ☐
Date Spudded 10/15/84	Date Compl. Ready to Prod. 12/1/84		Total Depth 5602		P.B.T.D. 5539			
Elevations (DF, RAB, RT, GR, etc.) 3204' GR	Name of Producing Formation Bone Spring		Top Oil/Gas Pay 5430'		Tubing Depth 5339			
Perforations 5430 - 5454					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2	13 3/8		620		600			
12 1/4	8 5/8		2604		1600			
7 7/8	5 1/2		5602		950			
	2 7/8		5339					

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)

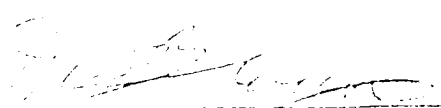
Date First New Oil Run To Tanks 12/1/84	Date of Test 12/1/84	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 1350	Casing Pressure 0	Choke Size 14/64
Actual Prod. During Test	Oil-Bbls. 10	Water-Bbls. 0	Gas-MCF 250

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pump, back prod.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.


Regional Production Manager
12/1/84
Date

OIL CONSERVATION COMMISSION

APPROVED JAN 11 1985
BY Original Signed By Mike Williams
TITLE Oil & Gas Inspector

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 data 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 completing wells.