

**NEW MEXICO
OIL CONSERVATION COMMISSION**
P. O. BOX 2066
SANTA FE, NEW MEXICO

GAS SUPPLEMENT NO. ~~(NW)~~ (SE) SF-3880

DATE 12-3-73

**NOTICE OF WELL CONNECTION OR AUTHORITY TO ASSIGN ALLOWABLE
ALL VOLUMES EXPRESSED IN MCF**

The operator of the following well has complied with all the requirements of the Oil Conservation Commission and may be assigned an allowable as shown below.

Date of Connection _____ Date of First Allowable or Allowable Change _____
Purchaser Transwestern & Llano Pool Carlsbad Morrow, South
Operator Cities Service Oil Company Lease Spencer-A
Well No. 1 Unit Letter O Sec. 30 Twp. 22S Rnge. 27E
Dedicated Acreage _____ Revised Acreage _____ Difference _____
Acreage Factor .98 Revised Acreage Factor _____ Difference _____
Deliverability _____ Revised Deliverability _____ Difference _____
A x D Factor _____ Revised A x D Factor _____ Difference _____

New allocation Factor issued due to _____ DIST. # _____
improper well classification. (242980.54)

CALCULATION OF SUPPLEMENTAL ALLOWABLE

| MONTH | % OF MO. | PREV. ALLOW | REV. ALLOW | PREV. PROD. | REV. PROD. | REMARKS |
|---|----------|-------------|------------|-------------|------------|-----------------------------|
| JANUARY | | | | | | |
| FEBRUARY | | | | | | |
| MARCH | | | | | | |
| APRIL | | | | | | |
| MAY | | | | | | |
| JUNE | | | | | | |
| JULY | | | | | | |
| AUGUST | | | | | | |
| SEPTEMBER | | | | | | |
| OCTOBER | | | | | | |
| NOVEMBER | | | | | | |
| DECEMBER | | 250455 | 238121 | | | |
| TOTALS | | | | | | |
| ALLOWABLE PRODUCTION DIFFERENCE - - - - - | | | | | | |
| Oct. SCHEDULE O/U STATUS - - - - - | | | | | | |
| REVISED Oct. O/U STATUS - - - - - | | | | | | |
| EFFECTIVE IN Jan. SCHEDULE - - - - - | | | | | | |
| PREVIOUS PERIOD ADJUSTMENTS - - - - - | | | | | | |
| | | | | | | CURRENT CLASSIFICATION N TO |

RECEIVED
JAN 2 1974
O. C. C.
ARTESIA OFFICE

NOTICE OF SHUT-IN

The following described well has been Shut-in for Failure of Compliance:

Purchaser _____ Pool _____ Date _____
Operator _____ Lease _____
Well No. _____ Unit Letter _____ Sec. _____ Twp. _____ Rnge. _____
Effective date of Shut-in _____ Reason for Shut-In _____

A. L. PORTER, Jr., Director

By _____