

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED BY

AUG 24 1983

O. C. D.

ARTESIA, OFFICE

Belco Development Corporation ✓

Address  
10,000 Old Katy Rd. Ste. 100, Houston, Texas 77055

Reason(s) for filing (Check proper box)

New Well ☐Recompletion ☐Change in Ownership ☒

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name and address of previous owner Belco Petroleum Corporation, 10,000 Old Katy Rd. Ste. 100 Houston, TX. 77055

## DESCRIPTION OF WELL AND LEASE

|   |               |   |  |     |           |
|---|---------------|---|--|-----|-----------|
| Lease Name<br>Martin Com.   | Well No.<br>1 | Pool Name, Including Formation<br>South Carlsbad Morrow | Kind of Lease<br>State, Federal or Fee | Fee | Lease No. |
| Location<br>Unit Letter <u>F</u> ; <u>2198</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u><br>Line of Section <u>20</u> Township <u>22-S</u> Range <u>27-S</u> , NMPM, <u>Eddy</u> County |               |   |  |     |           |

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |  |                    |
|--|--|--------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/><br>None   | 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"/><br>Llano, Inc. & El Paso National Gas Company | Address (Give address to which approved copy of this form is to be sent)<br>P. O. Box 1320, Hobbs, NM 88240; P.O. Box 1492 |                    |
| If well produces oil or liquids, give location of tanks.   | Unit<br><u>F</u>   | Sec.<br><u>20</u>  |
|  | Twp.<br><u>22S</u>   | Rge.<br><u>27S</u> |
|  | Is gas actually connected? <u>Yes</u> When <u>1-12-76 (Llano); 10-6-76 (El Paso)</u>                                       |                    |

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 Res'v. | Diff. Res'v. |
| Date Spudded                       | Date Compl. Ready to Prod.  |          | Total Depth       |          | P.B.T.D.     |           |             |              |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation |          | Top Oil/Gas Pay   |          | Tubing Depth |           |             |              |
| Perforations                       |                             |          | Depth Casing Shoe |          |              |           |             |              |

## TUBING, CASING, AND CEMENTING RECORD

|           |                      |           |              |
|-----------|----------------------|-----------|--------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|           |                      |           |              |
|           |                      |           |              |
|           |                      |           |              |
|           |                      |           |              |

## 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           | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |
| Testing Method (pistol, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size            |

## CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

JO ANN RANDALL

Production Accountant

August 15, 1983

OIL CONSERVATION DIVISION  
AUG 24 1983APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY \_\_\_\_\_ ORIGINAL SIGNED  
BY LARRY BROOKS  
GEOLOGIST - NMCD

TITLE \_\_\_\_\_

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, transporter, or other such change of condition.