

## 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

ARTESIA, OFFICE

Operator 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 ☐ Dry Gas ☐  
Casinghead 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

## II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Martin</b>	Well No. <b>5</b>	Pool Name, including Formation <b>Carlsbad So. (Cherry Canyon)</b>	Kind of Lease State, Federal or Fee <b>Fee</b>	Lease No.
Location Unit Letter <b>L</b> ; <b>2210</b> Feet From The <b>South</b> Line and <b>990</b> Feet From The <b>West</b> Line of Section <b>20</b> Township <b>22-S</b> Range <b>27-E</b> , NMPM, <b>Eddy</b> County				

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Navajo Crude Oil Purchasing Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Drawer 175, Artesia, New Mexico 88210</b>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>None</b>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit <b>L</b>	Sec. <b>20</b>
	Twp. <b>22-S</b>	Rge. <b>27-E</b>
	Is gas actually connected? <b>No</b> When	

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.
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

## V. TEST DATA AND REQUEST FOR ALLOWABLE 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)

First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
h of Test	Tubing Pressure	Casing Pressure	Choke Size
Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

## VI. WELL

Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

## VII. STATEMENT OF COMPLIANCE

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



JO ANN RANDALL

Production Accountant

August 15, 1983

(Date)

## OIL CONSERVATION DIVISION

AUG 25 1983

APPROVED \_\_\_\_\_, 19

BY ORIGINAL SIGNED  
BY LARRY BROOKS  
GEOLOGIST - NMOC

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, well name or number, or transporter, or other such change of condition.