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State of New Mexico Energy, Minerals and Natural Resources Department

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O. C. D.

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT II P.O. Drawer DD, Antesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	T	O TRA	NSPORT C	IL AND N	ATURAL G	AS			
Operator						•	API No. -015-2681		
Collins & Ware, Inc.	• •			·		30	-013-2001	<u> </u>	
Address 303 W. Wall, Suite 2	2200. Mi	dland.	TX 7970)1		•			
Reason(s) for Filing (Check proper box)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Other (Please expl	lain)			
New Well		Change in '	Transporter of:			·			
Recompletion	Oil		Dry Gas]					
Change in Operator	Casinghead		Condensate]					
If change of operator give name							1		
and address of previous operator			0//	1 0	1 1001	/			
II. DESCRIPTION OF WELL	AND LEA	SE .	2. Coule	lag Sl	4/1 1/20	Rg_		T	
ease Name Well No. Pool Name, Includi								Lease No.	
Ray "25"		1	Wilder	it (Atok a	37	State,	Federal or Fee	<u> </u>	
Location	•			a . 1	1007	1	1	West	
Unit Letter N	_ :8	97	Feet From The	South L	ine and1980	Fe	et From The	Line	
Section 25 Township	n 23 So	uth	Range 28 H	last i	nmpm. Ed	ldy		County	
Section 25 Townshi	23 00	den	Kange 20 1	1400	MATERIA, 20	- 		county	
III. DESIGNATION OF TRAN	SPORTER	OF OI	L AND NAT	URAĽ GAS	5				
Name of Authorized Transporter of Oil or Condensate XX							copy of this form	is to be sent)	
Scurlock Permiam					2500 City West Blvd. Houston, TX 77042				
Name of Authorized Transporter of Casinghead Gas or Dry Gas XX					Address (Give address to which approved copy of this form is to be sent)				
El Paso Natural Gas					P.O. Box 1492, El Paso, TX 79978				
If well produces oil or liquids,	•	:	• . :	_	ally connected?	When		·	
give location of tanks.		25	23 5 281			L	1/15/92		
If this production is commingled with that f	from any other	lease or pe	ool, give commit	igling order nu	mber:				
IV. COMPLETION DATA	 -	Oil Well	Gas Well	New Wel	Workover	Deepen	Plug Back Sai	me Res'v Diff Res'v	
Designate Type of Completion -	- (X)	Oll Well	X	I X	i i i i i i i i i i i i i i i i i i i	Deepen			
Date Spudded	Date Compl. Ready to Prod.			Total Depth	1	JI	P.B.T.D. (1	Uni. VI Bridge	
9/12/91	12/16/91			12.0	080'		1	Plug Packer)	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Ga			Tubing Depth		
2991 DF	2991 DF Atoka				11,827'			11,587,50 Depth Casing Shoe	
Perforations					ļ ·				
11,827' - 11,8							12,07	3'	
	TUBING, CASING AND			D CEMENT				SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				
17-1/2"		. 3/8			680'			690 1250	
12-1/4"		9 – 5/8			2630'			1st-560 2nd-780	
8-1/2"	7" 4 - 1/2" Liner T			<u></u>	10,600' op 10,410' Bottom 12,07			200	
y. TEST DATA AND REQUES	T FOR AL	LOWA	Liner BLE	TIOD TOP	+IO DOLLE	<u> </u>	D	200	
OIL WELL (Test must be after re	ecovery of tota	I volume of	load oil and mu	st be equal to c	or exceed top allo	wable for this	depth or be for f	iull 24 hpurs.)	
OIL WELL (Test must be after recovery of total volume of load oil and must Date First New Oil Run To Tank Date of Test					Producing Method (Flow, pump, gas lift, etc.) Part ID -2				
	pace of real							2-28-92	
Length of Test	Tubing Press	ure		Casing Pres	sure	-	Choke Size	comp & BIT	
·							Gas- MCF		
Actual Prod. During Test	Oil - Bbls.			Water - Bbi	·8.		Gas- MCF		
	L			<u> </u>			L		
GAS WELL							Gravity of Cond		
Actual Prod. Test - MCF/D	Length of Test			Bbls. Conde	Bbls. Condensate/MMCF				
724	24. hours			-	() Casing Pressure (Shut-in)				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			1	-			6/1	
Separator	620			Pack	er		16/	04	
VI. OPERATOR CERTIFICA					OIL COM	ISERVA	ATION DI	VISION	
I hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION				
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					FEB 2 1 1992				
is true and complete to the best of mythiowiedge and benci.					Date Approved				
(Jane + Marine					ODIOINAL CIONED DV				
Signature Agent for					By ORIGINAL SIGNED BY				
Signature Agent for Agent for James F. O'Briant Collins & Ware, Inc.					MIKE WILLIAMS SUPERVISOR, DISTRICT I				
Printed Name		7	litle	Title	3				
1/30/92 (915) 683-5511 Telephone No.					The state of the s				

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.