

Oil Conservation Division
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

DATE RECEIVED	
DEPARTMENT	
STAFF	
UNIT	
OFFICE	
REPORTER	
REMARKS	
ADDITIONAL OFFICE	
NOTES	

CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DEC 14 1981

El Paso Natural Gas Company

Box 1492, El Paso, Texas 79978

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change Lease Name and Well Number
Recompletion ☐	From: Citices-Federal No. 1
Change in Ownership ☒	
Change in Transporter of:	
Oil ☐	Dry Gas ☐
Casinghead Gas ☐	Condensate ☐

change of ownership give name Alpha Twenty-One Production Co., 2100 First Natl. Bk. Midland, Tx. 79701
and address of previous owner

PROJECT APPROVED BY NMCD ORDER NO. R-6175-A

DESCRIPTION OF WELL AND LEASE	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Well Name Washington Ranch	1	Washington Ranch Morrow	State, Federal or Fee Federal	0472258
Storage Project WI				

Location
Unit Letter F : 1650 Feet From The North Line and 1650 Feet From The West
Line of Section 34 Township 25 South Range 24 East NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Oil ☐ or Condensate ☒		Box 3119, Midland, Texas 79702				
The Permian Corporation		Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒		Box 1492, El Paso, Tx. 79978				
El Paso Natural Gas Company						
(If well produces oil or liquids, give location of tanks.)	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					YES	1-29-72

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, CR, 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

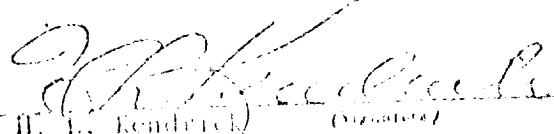
TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed total allowable for this depth or be for full 24 hours)

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

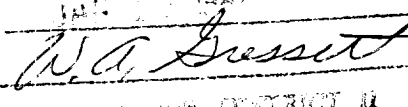
GAS WELL		Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	
Testing Method (split, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

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.


H. L. Kendrick
Sr. Production Engineer
November 25, 1981
(Date)

OIL CONSERVATION DIVISION

APPROVED  10
BY
TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1404.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the days tested (as on the well in accordance with RULE 1411.
All sections of this form must be filled out completely for wells on lease and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, or transportation or other such change of record.
Separate Form C-104 must be filled for each pool in a recompleted well.