

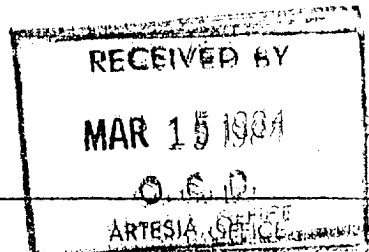
OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REVISED 10-1-76

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

J. C. Williamson

Address P.O. Box 16 Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input checked="" type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>

Other (Please explain) SINGHEAD GAS WELL NOT EL

DATE AFTER 4-16-84

DEEPEN

WELL IS OBTAINED

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Ross Draw Unit	2	Ross Draw Delaware	State, Federal or Fee Federal	NM 0554774

Location

Unit Letter C : 1980 Feet From The West Line and 660 Feet From The North

Line of Section 34 Township 26 Range 30, NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Refining Co.	P.O. Box 159 Artesia, New Mexico 88210

Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Conoco Inc.	P.O. Box 1267 Ponca City, Ok 74603

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rgs.	Is gas actually connected?	When
	C	34	26	30	No	

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. P.
X					X			Deepen
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
2-22-84	3-6-84	3898'	3868'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
2998.9 GR	Delaware	3816'	3768'					
Perforations			Depth Casing Shoe					
3816' - 3822' (3 holes)			3898'					

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14-1/4"	10-3/4"	720'	475 sx Class "C"
7-7/8"	5-1/2"	3585'	275 sx Class "C"
4-3/4"	3-1/2" liner	3490 - 3898'	60 sx Class "C"
	2-3/8", 2-1/16" (3100-3800)	3768'	

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
able 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.)
3-9-84	3-9-84	Flowing
Length of Test	Tubing Pressure	Casing Pressure
24 Hours	150#	Packer
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.
67	67	213
		Choke Size
		18/64
		Gas-MCF
		123

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, 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.

Agent

(Title)

3/13/84

(Date)

OIL CONSERVATION DIVISION

MAR 16 1984

APPROVED

Original Signed By

BY Leslie A. Clements

TITLE Supervisor District II

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 deviated
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for all
wells on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of own
well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multi-