

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

MAR 15 1984

O. C. D.

ARTESIA, OFFICE

Operator
J. C. Williamson

Address

P.O. BOX 16 Midland, Texas 79702

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)

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 4-19-84
UNLESS AN EXCEPTION FROM
THE B. L. M. IS OBTAINEDIf change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Holly "A" Federal	Well No. 1	Pool Name, Including Formation Brushy Draw Delaware	Kind of Lease State, Federal or Fee Federal	Lease No. NM 19609
Location				
Unit Letter G	2173	Feet From The North	Line and 1980	Feet From The East
Line of Section 26	T. anship 26	Range 29	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"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) 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"/> Conoco, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1267 Ponca City, OK 74603					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 26	Twp. 26	Rge. 29	Is gas actually connected? No	When 3-14-84

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. R. <input type="checkbox"/>
Date Spudded 11-28-83	Date Compl. Ready to Prod. 2-22-84		Total Depth 6300'		P.B.T.D. 6257'			
Elevations (DF, RKB, RT, GR, etc.) 2907' GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 5097'		Tubing Depth 6221'			
Perforations 5097' - 6218' (69 holes)					Depth Casing Shoe 6300'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2	12-3/4"	365'	375 SX
11"	8-5/8"	2834.80'	150 SX
7-7/8"	4-1/2"	6300'	700 SX
	2-3/8"	6221'	

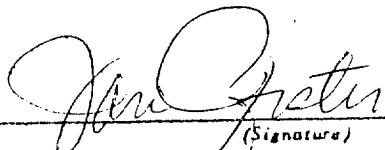
TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL(Test must be after recovery of total volume of load oil and must be equal to or exceed top u.
able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 3-9-84	Date of Test 3-9-84	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 Hours	Tubing Pressure 0	Casing Pressure 0	Choke Size 0
Actual Prod. During Test 67	Oil - Bbls. 67	Water - Bbls. 237	Gas - MCF 84

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.

Secretary

(Title)

3/12/84

(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 19 1984

Original Signed 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 device
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-
er, well name or number, or transporter, or other such change of condi-
tion.Separate Forms C-104 must be filled for each pool in multi-
completed wells.