

OIL CONSERVATION DIVISION

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

Form O-101
Revised 10-1-70

JUN 21 1984

O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Worth Petroleum Company

P O Box 17406, Fort Worth, TX 76102

Reason(s) for filing (Check proper box)

Change in Transporter of:
Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Change of ownership give name
Address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name: Gulf-Federal Well No.: 1 Pool Name, including Formation: Brushy Draw Delaware Kind of Lease: State, Federal or Free federal Lease No.: NM11038

Unit Letter: M ; 330 Feet From The south Line and 330 Feet From The west

Line of Section: 23 Township: 26S Range: 29E, NMPM, Eddy County

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil: The Permian Corporation Address (Give address to which approved copy of this form is to be sent): P O Box 1183, Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas: Conoco, Inc. Address (Give address to which approved copy of this form is to be sent): P O Box 2197, Houston, TX 77001

Well produces oil or liquids, or location of tanks: Unit: M Sec.: 23 Twp.: 26S Rge.: 29E Is gas actually connected? ~~no~~ yes When: 8-24-84

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

COMPLETION DATA

Designate Type of Completion - (X) Oil well: X Gas well: New Well: X Workover: Deepen: Plug Back: Same Heav. Diff. Heav.
Completed: 4/20/84 Date Compl. ready to Prod.: 6/6/84 Total Depth: 5125 P.A.T.D.: 5082
Casing (D.F., RAB, RT, CR, etc.): 2893.5 gr Name of Producing Formation: Brushy Draw Delaware Top Oil/Gas Pay: 4956 4965 Fath. Depth: 5044
Formations: 4968, 70, 79, 88, 90, 92, 5001, 3, 4, 9, 11, 15, 23, 27, 29, 31, 33, 35, 37, 39, 41, 45, 53 Depth Casing Shoe: 5125

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8-5/8	499	300
7-7/8	5 1/2	5125	350
	2-7/8	5044	

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.)

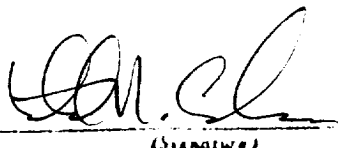
Initial New Oil Run To Tanks: June 4 Date of Test: June 5 Producing Method (Flow, pump, gas lift, etc.): pump
Length of Test: 24 hr Tubing Pressure: - Casing Pressure: 140 psi Choke Size: 20/64
Oil Flow During Test: 98 Oil-Bole: 98 Water-Bole: 280 Gas-MCF: 51

WELL

Oil Prod. Test-MCF/D: Length of Test: Boile. Condensate/MMCF: Gravity of Condensate:
Flow 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 Department have been complied with and that the information given is true and complete to the best of my knowledge and belief.



President

(Title)

June 18, 1984

OIL CONSERVATION DIVISION

APPROVED: JUN 25 1984, 19

Original Signed By
Leslie A. Clements
Supervisor District 8

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 portions of this form must be filled out completely for allowance on new and recompleted wells.
Fill out only Sections I, II, III, and VI for change of owner.