NEW MEXICO
MINERALS DEPARTMENT

Form C-104
Revised 10-1-78

RECEIVED BY
APR 22 1985
O C D
ARTESIA, OFFICE

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Transporter	Oil ✓
	Gas ✓
Operator	✓

WORTH PETROLEUM COMPANY ✓

P O BOX 17406, FORT WORTH, TX 76102

Reason(s) for filing (Check proper box)

- New Well [XX]
- Recompletion [ ]
- Change in Ownership [ ]

Change in Transporter of:

- Oil [ ]
- Dry Gas [ ]
- Casinghead Gas [ ]
- Condensate [ ]

Other (Please explain)

REQUEST FOR TESTING ALLOWABLE OF 2500 FOR APRIL

If change of ownership give name and address of previous owner Delaware 5000-5047

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)	Lease No.
WORTH-FEDERAL	3	UNDES. BRUSHY DRAW DELAWARE	FEDERAL	NM21767

Unit Letter G : 2265 Feet From The NORTH Line and 1550 Feet From The EAST

Section 22 Township 26S Range 29E, NMPM, EDDY County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate	Address (Give address to which approved copy of this form is to be sent)
PERMIAN CORPORATION	P O BOX 1183, HOUSTON, TX 77002
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
CONOCO, INC	P O BOX 2197, HOUSTON, TX 77001

Is well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	H	22	26S	29E	YES	APRIL 14, 1985

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 Resv.	Diff. Resv.
	X		X					

Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
3-17-85	4-14-85	5110'	5080'
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
2884.4 GL	BRUSHY DRAW (DELAWARE)	5000'	4982'
Perforations			**Depth Casing Shoe**
5000-5047'; 18 HOLES			5109'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12¼"	8-5/8" 24#	434'	450
7-7/8"	5½" 17#	5110'	350
	2-7/8"	4982'	

TEST DATA AND REQUEST FOR ALLOWABLE

(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)

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

GAS WELL

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

(Signature)

ADMINISTRATIVE ASSISTANT
(Title)

APRIL 19, 1985
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 23 1985, 19

BY Original Signed By Mike Williams

TITLE Oil & Gas Inspector

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 sections of this form must be filled out for allowable on new and recompleted wells.

Fill only Sections I, II, III, and VI for changes of owner, well name or number, transporter, or other such change of condition.