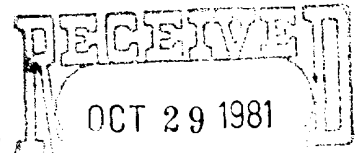


OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	1
PRODUCTION OFFICE	

OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICOOperator
J. C. WilliamsonAddress
P. O. Box 16 Midland, Texas 79702

RECEIVED

Reason(s) for filing (Check proper box)

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

Other (Please explain)

DEC 16 1981

If change of ownership give name
and address of previous ownerO. C. D.
ARTESIA, OFFICE

DESCRIPTION OF WELL AND LEASE

Lease Name EP-USA	Well No. 1	Pool Name, including Formation Brushy Draw Oil Wildcat	Kind of Lease State, Federal or Free Federal	Lease No. 13997
Location Unit Letter I ; 1650 Feet From The South Line and 660 Feet From The East Line of Section 26 Township 26E Range 29E, NMPM, Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)						
Basin Inc.	P. O. Box 2297 Midland, Texas 79702						
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)						
El Paso Natural Gas	P. O. Box 1492 El Paso, Texas 79978						
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 26	Twp. 26	Rge. 29	Is gas actually connected? No	When 4-1-82	Waiting on pipeline

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.
		XX	XX					
Date Spudded 6/29/81	Date Compl. Ready to Prod. 10/1/81	Total Depth 3047'	P.B.T.D. 3047'					
Elevations (DF, RKB, RT, GR, etc.) 2893.2 GR	Name of Producing Formation Delaware	Top Oil/Gas Pay 2988'	Tubing Depth 2865'					
Perforations Open Hole			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
18"	10 3/4"	361'	Circulated Cement
10"	8 5/8"	1291'	Mudded In
8"	5 1/2"	2968'	275
5"	2 3/8"	2865'	Hung on well head

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 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

Posted ID-3
Added CGT-BE
4-16-82

GAS WELL

Actual Prod. Test-MCF/D 1,458	Length of Test 24	Bbls. Condensate/MMCF 0.686	Gravity of Condensate 42
Testing Method (piston, back pr.) Dead Weight Back Press	Tubing Pressure (shut-in) 1450#	Casing Pressure (shut-in) Packer	Choke Size 16/64"

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)
Production Secretary(Title)
October 27, 1981

(Date)

OIL CONSERVATION DIVISION

APR 14 1982

APPROVED _____, 10

BY W. A. Gussett
SUPERVISOR, DISTRICT II

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 deviating tests taken on the well in accordance with RULE 111.

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

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

Separate Forms C-104 must be filed for each pool in multiple completed wells.

OIL CONSERVATION DIVISION

P. O. DRAWER DD

ARTESIA RECEIVED 88210

APR 13 1982

April 5, 1983

NOTICE OF GAS CONNECTION

O. C. D.

DATE

ARTESIA OFFICE

This is to notify the Oil Conservation Division that connection for the purchase
of gas from the J. C. Williamson

OPERATOR

El Paso USA #1

Eddy

I 26-26-29

LEASE & WELL

COUNTY

UNIT

S-T-R

Brushy Draw Delaware

El Paso Natural Gas Co.

POOL

NAME OF PURCHASER

was made on

April 1, 1982

34660-8-01

DATE

SITE CODE

SITE WELL NAME

El Paso Natural Gas Co.

PURCHASER

Irvin R. Elliott

REPRESENTATIVE

Assistant Chief Division Dispatcher

TITLE

TRE: b1

cc: Operator

Oil Conservation Division - Santa Fe, NM

M. E. McEuen

Proration

Measurement - Jal

R. L. Tabb

Earl Smith

File