

OIL CONSERVATION DIVISION

P. O. BOX 2008

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DEPARTMENT	
FILE	
MAIL	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATION	
PRODUCTION OFFICE	
COMPLIANCE	

Name - Lewis Corp. (Print)

Address

Box 100 Lubbock, Texas 79400

Reason for filing (Check one box)

Change in Transporter's oil	
Oil	☒
Change in Gas	☐
Change in Gas	☐
Change in Gas	☐

Other (If true, explain)

If change of ownership gives name
and address of previous owner

DESIGNATION OF WELL AND LEASE

County	State	Section	Range	Line	Feet From The	East
San Juan	New Mexico	36	24N	8W	1780	300
Unit Letter	1	1780	South	Line and	300	Feet From The
Line of Section	36	Township	24N	Range	8W	NMNM, San Juan

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)				
Great Refining Company	7227 W. 16th St. Phoenix, Ariz. 85020				
Name of Authorized Transporter of Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)				
Mesa Petroleum Co.	Box 3000 One Mesa Square Amarillo, Tx. 79109				
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When				
Unit	Sec.	Twp.	Range	Yes	Unknown 7-22-87
1	36	24N	8W		

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Hole	Diff. Hole
(X) Completion								
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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)

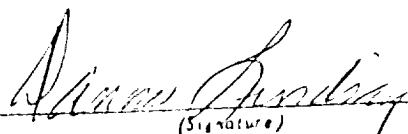
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
		Gas - MCF

GAS WELL

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



Revenue/Production Supervisor

1-28-83
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19

BY _____ Original

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 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 change of owner, well name or number, or transporter, or other such change of condition.

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