

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS30631N
7-12-84

1.

CO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PROMOTION OFFICE	

Operator OKLAHOMA OIL AND GAS INC	
Address 3961 MacArthur Blvd. Newport Beach, Calif 92660	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

JUN 22 1984

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name "SHEILA"	Well No. One	Pool Name, including Formation Verde-Gallup	Kind of Lease State, Federal or Fee	Lease No. Fed SF 080212
Location Unit Letter B : 765 Feet From The North Line and 2160 Feet From The East Line of Section 5 Township 30N Range 15W NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
GIANT REFINERY	P.O. BOX 256 Farmington, N M 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 5	Twp. 30N	Rge. 15W	Is gas actually connected? None	When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
XXX								
Date Spudded June 6, 84	Date Compl. Ready to Prod. June 18	Total Depth 2840	P.B.T.D. 2814					
Elevations (DF, RKB, RT, GR, etc.) 5471	Name of Producing Formation Upper Gallup	Top Oil/Gas Pay 2780	Tubing Depth 2740					
Perforations Open Hole Completion 2542-2814	Depth Casing Shoe 2542							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2	9 5/8 36lb	125	60
8 3/4	7 23 lb	2542	500
	3 1/2	2540	

V. 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 6-20-84	Date of Test 6-20-84 to 6-21-84	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure	Casing Pressure N/A	Choke Size N/A
Actual Prod. During Test 107 barrels	Oil - Bbls. 107	Water - Bbls. 0	Gas - MCF 0

GAS WELL

Actual Prod. Test - MCF/D N/A	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

I. 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.

Denny Reeves
(Signature)
Agent Oklahoma Oil & Gas
(Title)
6-22-84
(Date)

OIL CONSERVATION DIVISION

7-1-84
APPROVED JUL 13 1984
BY GAYNE J. JONES, RICHARD CHAVEZ
SUPERVISOR DISTRICT #3
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 all wells on new and recompleted wells.

Fill out only Sections I, II, III, and IV for changes of well name or number, or transporter or other such change of completion