

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Hallwood Petroleum, Inc. <i>9812</i>		Well API No. 30-045-28912
Address P. O. Box 378111, Denver, Colorado 80237		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of: <i>2806553</i>	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator Maralex Resources, Inc., P. O. Box 421, Blanco, NM 87412-0421		

II. DESCRIPTION OF WELL AND LEASE

Lease Name SHIOTANI <i>13842</i>	Well No. 7	Pool Name, including Formation Basin Fruitland Coal <i>71629</i>	Kind of Lease State, Federal or <input checked="" type="radio"/> Fee	Lease No.
Location Unit Letter <u>K</u> : <u>1700</u> Feet From The <u>South</u> Line and <u>1495</u> Feet From The <u>West</u> Line Section <u>33</u> Township <u>30N</u> Range <u>12W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> NA <i>Water</i> <i>2806553</i>	Address (Give address to which approved copy of this form is to be sent) NA	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co. <i>2806552</i>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, TX 79978	
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 33
	Twp. 30N	Rge. 12W
	Is gas actually connected? <u>Yes</u> When? <u>10/5/93</u>	
If this production is commingled with that from any other lease or pool, give commingling order number: <u>NA</u>		

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 12-31-92	Date Compl. Ready to Prod. 4-7-93		Total Depth 1782'		P.B.T.D. 1737'			
Elevations (DF, RKB, RF, GR, etc.) 5579' GR	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 1619'		Tubing Depth 1671'			
Perforations 1619'-1651' .45" 4 JSPF					Depth Casing Shoe 1777'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8" 24#		145.30'		165 sx Class B w/2% CaCl			
7 7/8"	5 1/2" 15.5#		1777'		285 sx Pacesetter Lite			
					w/6% gel+ 100 sx Class B			
					w/1% CF-14 & 0.4% Thri			

V. 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 Tank	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 260	Length of Test 24 hr	Bbls. Condensate/MMCF 0	Gravity of Condensate N/A
Testing Method (pilot, back pr.) Back pressure	Tubing Pressure (Shut-in) 110#	Casing Pressure (Shut-in) 110#	Choke Size 3/8 inch

VI. OPERATOR 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.

Kevin E. O'Connell *10/5/93*
Signature
Kevin O'Connell - Drlg. & Prod. Supervisor
Printed Name Title
10/4/93 (303)850-6303
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved OCT 0 6 1993

By *B. J. O'Connell*
SU. WISOR DISTRICT 13

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.