

OIL CONSERVATION DIVISION

P. O. BOX 2008

SANTA FE, NEW MEXICO 87501

RECEIVED

JUN 5 1981

O. C. D.

ARTESIA OFFICE

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
TRANSPORTER	
OIL	
NATURAL GAS	
OPERATOR	
PRODUCTION OFFICE	
Operator	

Stevens Oil Company

Address  
P. O. Box 2203, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name O'Brien "L"	Well No. 6	Pool Name, including Formation Twin Lakes-San Andres Assoc	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter D ; 330 Feet From The North Line and 330 Feet From The West Line of Section 5 Township 9-S Range 29-E, NMPM, Chaves County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Co. P/L Division	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 175, Artesia, N.M. 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Stevens Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2203, Roswell, New Mex. 88201					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 1	Twp. 9-S	Rge. 28-E	Is gas actually connected? Yes	When 6-3-81

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5-18-81	Date Compl. Ready to Prod. 6-2-81		Total Depth 2954'		P.B.T.D. 2930'			
Elevations (DF, RKB, RT, GR, etc.) 3968.5 GR, 3973.5 KB	Name of Producing Formation San Andres		Top Oil/Gas Pay 2780.5		Tubing Depth 2668'			
Perforations 2780.5, 81, 81.5, 2785.5, 86, 86.5, 2791, 91.5, 92, 2807.5, 08, 09.5, 10, 2814.5, 15, 15.5, 2819, 19.5, 2822.5, 23.					Depth Casing Shoe 2930'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/2"	8 5/8" 20#		130'		75 sacks			
7 7/8"	4 1/2" 9.5#		2930'		200 sacks			
4"	2 3/8"		2668'					

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 6-2-81	Date of Test 6-3-81	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 12 hrs	Tubing Pressure 110#	Casing Pressure Pkr.	Choke Size 3/4"
Actual Prod. During Test 91	Oil-Bbls. 87	Water-Bbls. 4	Gas-MCF N/A

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.

Owner

6-3-81

(Signature)

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 09 1981  
BY W. A. Gressitt  
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 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 changes 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 multiply completed wells.

RECEIVED

JUN 5 1981

May 28, 1981

O. C. D.  
ARIZONA, OFFICE

Stevens Oil Company  
O'Brien "L" 6  
Chaves County, N. M.

Deviation Survey

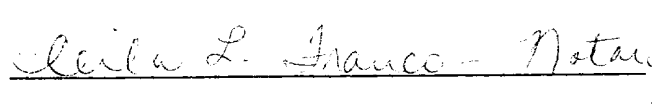
659'	1/4°
1663'	1/2°
1902'	3/4°
2181'	1°

  
STEVENS OIL COMPANY

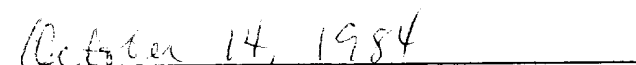
Owner

STATE OF NEW MEXICO  
COUNTY OF CHAVES

The foregoing instrument was acknowledged before me this 28th day  
of May, 1981, by Donald G. Stevens.

  
Leila L. Franco - Notary

My commission expires

  
October 14, 1984