

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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OCT - 6 1981

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

ARTESIA 1-1-81

Stevens Operating Corporation ✓

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. 9	Pool Name, including Formation Twin Lakes-San Andres Assoc.	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>K</u> : <u>2310</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>West</u> Line of Section <u>6</u> Township <u>9S</u> Range <u>29E</u> , NMPM, <u>Chaves</u> 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, New Mexico 88210			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Stevens Operating Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2203, Roswell, New Mexico 88201			
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 1	Twp. 9S	Rge. 29E
Is gas actually connected?		When		
Yes		7-15-81		

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 X	Gas Well	New Well	Workover	Deepen	Plug Back X	Same Res'v. X	Diff. Res'v.
Date Spudded 6-27-81	Date Compl. Ready to Prod. 7-14-81		Total Depth 2825'		P.B.T.D. 2724'			
Elevations (DF, RKB, RT, GR, etc.) 3976.5 GR, 3981.5 KB	Name of Producing Formation San Andres		Top Oil/Gas Pay 2683'		Tubing Depth 2594'			
Perforations 2683, 83.5, 84, 2693, 93.5, 94, 2701.5, 02, 02.5, 07, 07.5, 08, 11, 11.5, 12.	Depth Casing Shoe 2825'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8 5/8" 20#		DEPTH SET 128'		SACKS CEMENT 75			
7 7/8"	4 1/2" 9.5#		2825'		200			

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 7-14-81	Date of Test 9-28-81	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 45#	Casing Pressure Pkr.	Choke Size ---
Actual Prod. During Test 126.92	Oil-Bbls. 103.54	Water-Bbls. 23.38	Gas-MCF 86.11

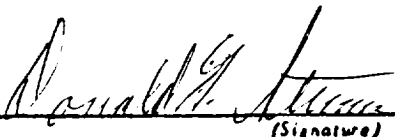
Posted ID
+ Comp. Book
NRC/STV
10-9-81

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.



President

10-5-81

(Title)

(Date)

OIL CONSERVATION DIVISION

OCT 7 1981

APPROVED _____, 19

BY W. A. Gissett

TITLE SUPERVISOR, DISTRICT II

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 multiple completed wells.