

MAR - 2 1982

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
ARTESIA, OFFICE

| | |
|-----------------------|--|
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| TRANSPORTER | |
| OPERATION | |
| REGISTRATION OFFICE | |

Operator
Transwestern Gas Supply Company

Address
P. O. Box 2521 Houston, Texas 77001

Reason(s) for filing (Check proper box)
 New Well ☒ Change in Transporter of:
 Recompletion ☐ Oil ☐ Dry Gas ☐
 Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|----------------------|---|---|-----------------------------|
| Lease Name Wolf State | Well No. 1 | Pool Name, including Formation Undesignated - Abo | Kind of Lease State, Federal or Fee State | Lease No. LG 5572 |
| Location Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East | | | | |
| Line of Section 16 Township 6S Range 23E , NMPM, Chaves County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|--|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Transwestern Pipeline Co. | P. O. Box 2521 Houston, TX 77001 |
| If well produces oil or liquids, give location of tanks. | Is gas actually connected? Yes When 3-15-82 |

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

V. COMPLETION DATA

| | | | | | | | |
|---|---|--------------------------------|----------|-----------------------------|--------|-------------------|----------------------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Reservoir, Diff. Res. |
| | | X | X | | | | |
| Date Spudded 9-12-81 | Date Compl. Ready to Prod. 11-10-81 | Total Depth 4322 | | P.B.T.D. 3665 | | | |
| Elevations (DF, RKB, RT, GR, etc.) 2405 GR | Name of Producing Formation ABO | Top Oil/Gas Pay 3158 | | Tubing Depth 3150 | | | |
| Perforations 3158-62; 3174-88; 3242-46; 3248-50; 3254-60; 3360-98; 3452-54; 3458-62; 3448-50; 3506-14; 3538-48; 3571-74; 3612-18; 3630-42; | | | | | | Depth Casing Shoe | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | | SACKS CEMENT | | | |
| 17 1/2 | 13 3/8 | 60' | | Grout to surface | | | |
| 12 1/4 | 8 5/8 | 1765' | | 1966 | | | |
| 7 7/8 | 4 1/2 | 4070' | | 475 | | | |
| | 2 3/8 | 3150' | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL


| | | | |
|---------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tanks | 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 |
| | | | |

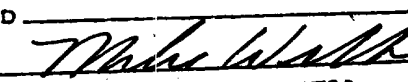
GAS WELL

| | | | |
|--|--|--|----------------------------|
| Actual Prod. Test - MCF/D 145 | Length of Test 4 hrs. | Bbls. Condensate/MCF 0 | Gravity of Condensate |
| Testing Method (pilot, back pr.) back pressure | Tubing Pressure (shut-in) 1033 | Casing Pressure (shut-in) 1125 | Choke Size 18/64 |

VI. 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.


R.R. Husband
 (Signature)
Manager, Production Services
 (Title)
February 23, 1982
 (Date)

OIL CONSERVATION DIVISION
MAR 19 1982
 APPROVED _____
 BY 
OIL AND GAS INSPECTOR
 TITLE _____

This form is to be filed in compliance with RULE 111.
 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.

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED

MAR 18 1982

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE March 16, 1982

This is to notify the Oil Conservation Division that connection for the
purchase of gas from the Transwestern Gas Supply Co. ✓
Operator

Wolf State
Lease

16-6S-23E, Chaves County
S.T.R.

Well #1 - Unit Letter "J"
Well Unit

Unit,
~~Wildcat~~ (Abo)
Pool

Transwestern *
Name of purchaser

was made on March 15, 1982

Transwestern Pipeline Company *
Company

H. N. Aicklen

H. N. Aicklen
Representative

Supervisor Gas Purchase Contract Administration
Title

cc: Operator
Oil Conservation Division - Santa Fe