

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input checked="" type="checkbox"/>

RECEIVED

AUG 5 1982

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.

SANTA FE OFFICE

Operator Fred Pool Operating Company ✓	
Address 402 West Second Street, Roswell, New Mexico 88201	
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"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Wagner	Well No. 2	Pool Name, Including Formation Undr. ABO	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter: J : 1980 Feet From The South Line and 1980 Feet From The East					
Line of Section 10 Township 7S Range 26E, NMPM, Chaves County					

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 Company	Post Office Box 2521, Houston, Texas 77252				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When
					No

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
		X	X					
Date Spudded 5/07/82	Date Compl. Ready to Prod. 7/27/82		Total Depth 4753		P.B.T.D. 4685			
Elevations (DF, RKB, RT, GR, etc.) 3697 GR, 3707 RKB	Name of Producing Formation Abo		Top Oil/Gas Pay 4212		Tubing Depth 4150			
Perforations 4212-4222, 6 shots & 4334-4346, 7 shots					Depth Casing Shoe 4750			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
4 3/4"	10 3/4"	1033	900
7 7/8"	4 1/2"	4750	450
	2 3/8"	4150	

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	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 2,784.0	Length of Test 4 hrs	Bbls. Condensate/MMCF 0	Gravity of Condensate -
Testing Method (pilot, back pr.) 4 pt. Back Pressure	Tubing Pressure (Shut-in) 836 psi	Casing Pressure (Shut-in) 850 psi	Choke Size 24/64" on 4th rate

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.

Fred J. Pool
(Signature)
Petroleum Engineer
(Title)
August 3, 1982
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 2 9 1983, 19
Original Signed By
BY Leslie A. Clements
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 deepen 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 own well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filled for each pool in multiple well.

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED

FEB 21 1983

O. C. D.
ARTESIA OFFICE

NOTICE OF GAS CONNECTION

DATE February 16, 1983

This is to notify the Oil Conservation Division that connection for the
purchase of gas from the Fred Pool Drilling Co. ✓
Operator

Wagner

Lease

10-7S-26E, Chaves County

S.T.R.

Well #2 - Unit Letter Unknown

Well Unit

Recessed 2 1/2" 260
Undesignated (Abo)

Pool

Transwestern
Name of purchaser

was made on February 15, 1983

Transwestern Pipeline Company
Company

H. N. Aicklen

H. N. Aicklen
Representative

Supervisor Gas Purchase Contract Administration
Title

cc: **Operator**
Oil Conservation Division - Santa Fe