

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JAN 10 1983

O. C. D.

ARTESIA, OFFICE

Operator PETROLEUM DEVELOPMENT CORPORATION ✓	
Address 9720-B Candelaria, N.E., Albuquerque, New Mexico, 87112	
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 checked="" 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lauralea	Well No. 2	Pool Name, including Formation Undes. Abo	Kind of Lease State, Federal or Fee	Fee
Location Unit Letter <u>L</u> ; <u>1,980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>35</u> , Township <u>7S</u> Range <u>26E</u> , NMPM, <u>Chaves</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"/>	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	P. O. Box 2521, Houston, Texas, 77252	
If well produces oil or liquids, give location of tanks.	Unit <u>L</u>	Sec. <u>35</u>
	Twp. <u>7S</u>	Rge. <u>26E</u>
	Is gas actually connected? <u>No</u> When <u>2-11-83</u>	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<u>X</u>	<u>X</u>					
Date Spudded <u>7/13/82</u>	Date Compl. Ready to Prod. <u>8/3/82</u>		Total Depth <u>4,738'</u>		P.B.T.D. <u>4,584'</u>			
Pool <u>Undes. Abo</u>	Name of Producing Formation <u>Abo</u>		Top Oil/Gas Pay <u>4,441'</u>		Tubing Depth <u>4,499'</u>			
Perforations <u>4,523' - 4,537'</u>					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>11"</u>	<u>8-5/8" - 23#</u>		<u>883'</u>		<u>450 sxs. Class "C" circ</u>			
<u>7-7/8"</u>	<u>4 1/2" - 10.5#</u>		<u>4,738'</u>		<u>325 sxs. " TOC 3,650'</u>			
	<u>2-3/8"</u>		<u>4,410' 4/499</u>					

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 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 <u>1,800</u>	Length of Test <u>4 hrs.</u>	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) <u>Back pressure/pt.</u>	Tubing Pressure <u>680</u>	Casing Pressure <u>680</u>	Choke Size <u>22/64"</u>

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Field Manager

November 5, 1982

OIL CONSERVATION COMMISSION

APPROVED JAN 22 1983

BY Original Signed By
Leslie A. Clements

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 Sections I, II, III, and VI only 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

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 Petroleum Development Corp. ✓
Operator

Lauralea

Lease

35-7S-26E, Chaves County

S.T.R.

Well #2 - Unit Letter ^L Unknown

Well Unit

Accon Slope Abo
Undesignated (Abo)

Pool

Transwestern
Name of purchaser

was made on February 14, 1983

Transwestern Pipeline Company
Company

H. N. Aicklen
Representative

Supervisor Gas Purchase Contract Administration
Title

cc: Operator
Oil Conservation Division - Santa Fe