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LAND OFFICE	
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OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATOR	
PRODUCTION OFFICE	

RECEIVED BY

NOV 28 1983

O. C. D.  
ARTESIA OFFICEREQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator	WALLACE OIL & GAS, INC. ✓
Address	50 Penn Place, Suite 850. Okla City, Oklahoma 73118
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 <u>1/17/85 R-7185</u>				
Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
PAYTON	1	WILDCAT (ABO)	State, Federal or Fee FEE	
Location				
Unit Letter	J	1980 Feet From The SOUTH Line and 1980 Feet From The EAST		
Line of Section	8	Township 11S	Range 25E	County CHAVES

## 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 checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
TRANSWESTERN PIPELINE	P.O. Box 2521, Houston, Texas	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	is gas actually connected? When
		Yes 11-17/83

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'v.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
8-13-82	5-6-83	4479'	4439'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
GR 3505' KB 3514.6'	ABO Sand/Lower	4006'	3994'					
Perforations	Depth Casing Shoe							
4006-4020'								

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	456'	500 sx of class C
12 1/4"	8 5/8"	1232.32'	450 sx POZ/200sx cl
7 7/8"	4 1/2"	4134.72'	160sx 50/50 poz

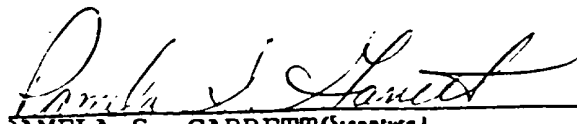
## TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
155	4 hrs	-0-	-0-
Testing Method (static, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
flowing	480#	586#	1/4"

## 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.



PAMELA S. GARRETT (Signature)

PRODUCTION SEC.

(Title)

11-22-83

(Date)

## OIL CONSERVATION DIVISION

NOV 29 1984

APPROVED \_\_\_\_\_, 19

BY \_\_\_\_\_  
Original Signed 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 deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

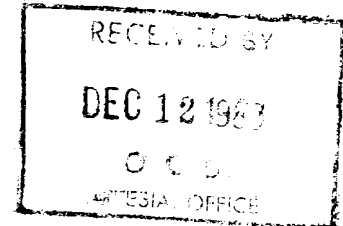
All sections of this form must be filled out completely for allowable on new and recompleted wells.

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.

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210



NOTICE OF GAS CONNECTION

DATE December 9, 1983

This is to notify the Oil Conservation Division that connection for the  
purchase of gas from the Wallace Oil & Gas ✓  
Operator

Payton

Lease

#1 - Unit Letter <sup>J</sup>Unknown-  
Well Unit

8-11S-25E, Chaves County  
S.T.R.

*Undesignated* (Abo)  
Pool

Transwestern  
Name of Purchaser

was made on December 8, 1983

Transwestern Pipeline Company  
Company

*Rodney C. Burke* Rodney C. Burke  
Representative

Jr. Analyst, Contract Administration  
Title

cc: Operator  
Oil Conservation Division  
P. O. Box 2088  
Santa Fe, New Mexico 87501