

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

MAR 07 1983

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASO. C. D.
ARTESIA, OFFICE

OF OILFIELD OPERATOR	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	

STEVENS OPERATING CORPORATION ✓

Address
P. O. Box 2408, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)

New Well ☒
Recompletion ☐
Change in Ownership ☐Change in Transporter oil:
Oil ☐
Casinghead Gas ☐Dry Gas ☐
Condensate ☐

Other (Please explain)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease Fee
Sun-Diamond	1	Pecos Slope Abo	State, Federal or Fee	Fee
Location				
Unit Letter	0	660 Feet From The South Line and 1980 Feet From The East		
Line of Section	20	Township 7S	Range 26E	NMPM, Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)					
Navajo Crude Oil Purchasing Co.	P. O. Drawer 175, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)					
Transwestern Pipeline Company	183 Pennsylvania, Roswell, NM 88201 P. O. 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- Yes	2-7-84

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.					
1-7-83	2-25-83	4280'	4232'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3566.8 GR	Abo	4019'	3926'					
Perforations	4019, 20, 21, 26, 27, 28, 29, 30, 31, 4103, 04, 05, 06, 08, 09 & 10					Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	910'	750 SXS
7 7/8"	4 1/2"	4280'	350 SXS
4"	2 3/8"	3926'	

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)

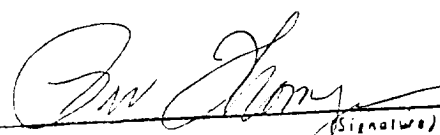
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
		Casing Pressure	Choke Size
Length of Test	Tubing Pressure	Water-Bbls.	Gas-MCF
Actual Prod. During Test	Oil-Bbls.		

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
2218	24hrs	0	--
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
back pressure	580	627	

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.



Pat Thompson

(Title)

Production Controller

(Date)

OIL CONSERVATION DIVISION
MAR 29 1984

APPROVED

BY

TITLE

Original Signed By

Leslie A. Clements

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 ownership, well name or number, or transporter, or other such change of conditions. Form C-104 must be filled for each pool in multi-