

JIL CONSERVATION DIVISIC
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Table with columns for CO. OF COPIES RECEIVED, DISTRIBUTION, SANTA FE, FILE, U.S.D.S., LAND OFFICE, TRANSPORTER, OIL, GAS, OPERATOR, PERMITS OFFICE.

Operator
Forster & Sweatt

Address
PO Box 161, Artesia, NM 88210

Reason(s) for filing (Check proper box)
New Well [X]
Recompletion [ ]
Change in Ownership [ ]
Change in Transporter of: Oil [ ], Dry Gas [ ], Casinghead Gas [ ], Condensate [ ]

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name: Bear Draw Fed. Well No.: 4 Pool Name: Bear Draw Q.G.S.A. Kind of Lease: State, Federal or Fee Lease No.: NM15007
Location: Unit Letter C, 660 Feet From The North Line and 2130 Feet From The West
Line of Section 28 Township 16S Range 29E, NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ] Conoco Transportation
Address (Give address to which approved copy of this form is to be sent) PO Box 2587, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ] Conoco, Inc.
Address (Give address to which approved copy of this form is to be sent) 7408 Andrews Highway, Odessa, TX 79762
If well produces oil or liquids, give location of tanks. Unit B, Sec. 28, Twp. 16S, Rge. 29E
Is gas actually connected? Yes When 12-26-82

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 [X] Gas Well [ ] New Well [X] Workover [ ] Deepen [ ] Plug Back [ ] Same Res'v. [ ] Diff. Res'v. [ ]
Date Spudded 11-17-82 Date Compl. Ready to Prod. 12-26-82 Total Depth 2650 P.B.T.D. 2595
Elevations (DF, RKB, RT, GR, etc.) 3634.8 GL Name of Producing Formation Queen G.S.A. Top Oil/Gas Pay Queen 1840 Tubing Depth 2560
Perforations Penrose 1840-1960, Lovington 2517-2530 Depth Casing Shoe 2650
Metex 2266-2284, Premier 2406-2422

TUBING, CASING, AND CEMENTING RECORD

Table with columns: HOLE SIZE, CASING & TUBING SIZE, DEPTH SET, SACKS CEMENT. Data: 12 1/2, 8 5/8, 350, 250 sks (circulated); 7 7/8, 4 1/2, 2650, 810 sks (circulated).

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 12-26-82 Date of Test 1-9-83 Producing Method (Flow, pump, gas lift, etc.) Pump
Length of Test 24 hrs Tubing Pressure - Casing Pressure 300# Choke Size -
Actual Prod. During Test 40 Oil-Bbls. 30 Water-Bbls. 10 Gas-MCF 175

GAS WELL

Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate
Testing Method (prior, back pr.) Tubing Pressure (shut-in) Casing Pressure (shut-in) Choke Size

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.

Clayton Smith (Signature)

Partner (Title)

1/12/83 (Date)

OIL CONSERVATION DIVISION

JAN 20 1983

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

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 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 completed wells.