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

RECEIVED BY
AUG 22 1985
O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator: ...int Petroleum Corp.

Address: P. O. Box 3805, Midland, Texas 79702

Reason(s) for filing (Check proper box): New Well ☐ Recompletion ☐ Change in Ownership XXXXX

Change in Transporter of: Oil ☐ Casinghead Gas ☐ Dry Gas ☐ Condensate ☐

Other (Please explain): Effective 8-1-85

If change of ownership give name and address of previous owner: Southland Royalty Co., 21 Desta Drive, Midland, Texas 79705

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Shugart B	1	Shugart (Y.SR.Q.G.)	Federal	029390

Location: Unit Letter 0 : 330 Feet From The South Line and 2310 Feet From The East

Line of Section 33 Township 18S Range 31E , NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil XX or Condensate ☐: Water Injection Well

Address (Give address to which approved copy of this form is to be sent):

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐:

Address (Give address to which approved copy of this form is to be sent):

If well produces oil or liquids, give location of tanks. Unit | Sec. | Twp. | Rge. | Is gas actually connected? | When

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.

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			Post ID-3
			8-30-85
			Chg Op

TEST DATA AND REQUEST FOR ALLOWABLE

(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)

OIL WELL

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
Testing Method (pitot, 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 is true and complete to the best of my knowledge and belief.

OIL CONSERVATION DIVISION

APPROVED AUG 27 1985

BY Original Signed By Les A. Clements

TITLE Supervisor District II

This form is to be filed ...