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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS **RECEIVED**

MAR 5 1975

Operator
Read & Stevens, Inc. **O. C. C.**
ARTESIA, OFFICE

Address
P. O. Box 2126, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:

Recompletion Oil Dry Gas

Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner

R-5013 5-28-75 Cemetery Wolfcamp Gas

II. DESCRIPTION OF WELL AND LEASE

Lease Name Allirish	Well No. 1	Pool Name, including Formation (Suggested) Cemetery Wolfcamp	Kind of Lease State, Federal or Fee	Lease No. NM-669
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Location
Unit Letter **P** ; **660** Feet From The **South** Line and **990** Feet From The **East**

Line of Section **30** Township **20-South** Range **25-East**, NMPM, **Eddy** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) N. Freeman Ave., Artesia, N.M. 88210			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Natural Gas Pipeline Company of America	Address (Give address to which approved copy of this form is to be sent) P. O. Box 238, Midland, Texas 79701			
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 30	Twp. 20-S	Rge. 25-E
	Is gas actually connected? No Yes		When Est. 3-20-75	

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.
		X	X					
Date Spudded 7-20-74	Date Compl. Ready to Prod. 11-20-74		Total Depth 9750' RKB		P.B.T.D. 7254' RKB			
Elevations (DF, RKB, RT, GR, etc.) 3586.1 GR-3600' RKB	Name of Producing Formation Wolfcamp lime		Top Oil/Gas Pay 7000'		Tubing Depth 6959'			
Perforations 7000'-7006' & 7020'-7030'					Depth Casing Shoe 7270'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	252' RKB	500 sx.-circulated
12 1/4"	8 5/8"	3184' RKB	1200 sx.-circulated
7 5/8"	5 1/2"	7270' RKB	150 sx.
	<i>2 3/8"</i>	<i>6959</i>	

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 2,600	Length of Test 24 hrs.	Bbls. Condensate/MMCF 16.15	Gravity of Condensate 56.7°
Testing Method (pilot, back pr.) Flow thru choke	Tubing Pressure (Shut-in) 2107 PSI	Casing Pressure (Shut-in) Pkr.	Choke Size 18/64"

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.

John P. Anderson Jr
(Signature)
Agent
(Title)
March 4, 1975
(Date)

OIL CONSERVATION COMMISSION
MAY 12 1975

APPROVED _____, 19____

BY *W. A. Gussert*

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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.