## NO. OF COPIES RECEIVED DISTRIBUTION SANTA FL

10-24-75

(Date)

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

- 1	FILE		AND	Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS	
	LAND OFFICE			,	
	TRANSPORTER OIL				
	GAS	OIL IS BEING	OIL IS BEING SOLD ON DIVISION ORDER BASIS		
OPERATOR					
1.	PRORATION OFFICE				
	Operator				
	Shell Oil Company				
	Address  D. O. Davidland Toxac 79701				
	P. O. Box 1509, Midland, Texas 79701				
	Reason(s) for filing (Check proper box)		Other (Please explain)		
	New Well XX	Change in Transporter of:			
	Recompletion	Oil Dry Gas	751		
	Change in Ownership	Casinghead Gas Conden	sate []		
	If change of ownership give name				
	and address of previous owner				
	DECOMPOSION OF MEY LAND I	EACE			
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation Kind of Lease	Lease No.	
	State	1 Bagley Penn, No	orth State, Federa	lor Fee State	
	Location				
		Feet From The South Lin	e and 1980 Feet From	The West	
	Unit Letter;	reet from theLin	e didi cet i toll		
	Line of Section 5 Tow	nship 12S Range	33E , NMPM, Le	a County	
	Eme of oction				
111	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S		
444.	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	ved copy of this form is to be sent)	
	Amoco Production Compar	ny - Trucks	P. O. Box 1189, Houston		
	Name of Authorized Transporter of Casinghead Gas 🔀 💮 or Dry Gas 🦳		Address (Give address to which approved copy of this form is to be sent)		
	Warren Petroleum Corporation		Box 966, Lovington, New Mexico 88260		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	· i	
	give location of tanks.	N 5 12S 33E	Yes	10-15-75	
	If this production is commingled with that from any other lease or pool, give commingling order number:				
IV.	COMPLETION DATA			Internal Service Posts Diff Books	
	Designate Type of Completio	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty, Diff, Resty,	
			X	P.B.T.D.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	10,390	
	4-17-75	9-15-75	10,480	Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	10,381	
	4286 DF	Penn	8510	Depth Casing Shoe	
	Perforations			10,480	
	8535-10,357 (54 hol	es)	CEMENTING RECORD	10,100	
		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	HOLE SIZE 14 3/4"	11 3/4"	310'	300	
		8 5/8"	3760'	400	
	11"	5 1/2"	10480'	410	
	7 7/8"	3 1/2	10460	T 1	
دمسا	THE DAME AND DESCRIPTION OF	OP ATTOWARTE (Tast and tast	fter recovery of total values of land oil	and must be equal to or exceed top allow-	
V	OIL WELL	able for this de	epsh or be jor juli 24 hours		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)	
	9-15-75	10-21-75	Pumping		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	24 hrs.				
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF	
		15	350	7	
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
				Challe Size	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
		<u></u>	1		
VI	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
	I hereby certify that the rules and	y certify that the rules and regulations of the Oil Conservation usion have been complied with and that the information given		APPROVED 19	
	Commission have been complied to the	with and that the information given e best of my knowledge and belief.	By Lerry Syton		
	above is true and complete to the best of my knowledge and belief.		Assistant I		
			TITLE		
			This form is to be filed in	compliance with RULE 1104.	
	(Signature)		If this is a request for allo	wable for a newly drilled or deepened	
	(Signature)		well, this form must be accomp tests taken on the well in acc	anied by a tabulation of the deviation ordance with RULE 111.	
Senior Drilling Engineer		All sections of this form w	ust be filled out completely for allow-		
	(Title)		able on new and recompleted v	vells.	

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.

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.