

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator

SPENCE ENERGY COMPANY

Address

381 TWO ENERGY SQUARE, 4849 GREENVILLE AVENUE, DALLAS, TEXAS 75206

Reason(s) for filing (Check proper box)

New Well

☐

Recompletion

☒

Change in Ownership

☐

Change in Transporter of:

Oil

☐

Dry Gas

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
STATE 14-X	1	DEVONIAN	State, Federal or Fee STATE	ST. 14-1
Location				
Unit Letter	M	330'	Feet From The SOUTH	Line and 330'
			Feet From The WEST	
Line of Section	14	Township	9S	Range 32E
				NMPM, Lea
				County

III. 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)
P&O FALCO, INC.		BOX 3419, Midland, Texas 79702
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		P.O. BOX 1589, TULSA, OKLAHOMA
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	M	14
		9S
		32E
		YES

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'
	X							
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
	10/10/86	11,115'	10,955'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
4326' G.L.	DEVONIAN	10,005	9948					
Perforations			Depth Casing Shoe					
11,055 - 11,060								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2"	13 3/8"	400'	425 SX					
11"	8 5/8"	3,800'	1100 SX					
7 7/8"	5 1/2"	11,115'	125 SX + 285 SX					
	2 7/8"	9,929'						

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.)	
10/11/86	10/11/86	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	1500 p.s.i.	1500 p.s.i.	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
533 W	80	533W	-0-

GAS WELL

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

VI. 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.

FIELD SUPERVISOR

10/11/86

OIL CONSERVATION DIVISION

APPROVED

NOV 13 1986

BY ORIGINAL SIGNED BY JERRY SEATON

TITLE

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 multiple completed wells.