

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator M W Petroleum Corporation		Well API No. 30-025-31948
Address 1700 Lincoln St. Suite 2000, Denver, CO 80203-4520		
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input checked="" type="checkbox"/> Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		
Other (Please explain) Temporary Allowable of 1000 BBLs TESTING July 1993		

II. DESCRIPTION OF WELL AND LEASE

Lease Name State 10	Well No. 1	Pool Name, Including Formation Bar U Devonian	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter B : 330 Feet From The North Line and 2500' 23' 71" Feet From The East Line Section 10 Township 9 South Range 32 East, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Amoco Pipeline ICT	<input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 502 NW Avenue, Levelland, TX 79336
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 10	Sec. 9-S
	Twp. 32-E	Rge. No
Is gas actually connected? When?		

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 5-14-93	Date Compl. Ready to Prod. 7-9-93	Total Depth 11,200'		P.B.T.D. 10,975'				
Elevations (DF, RKB, RT, GR, etc.) 4455' RKB	Name of Producing Formation Silurian Devonian	Top Oil/Gas Pay 10,932'		Tubing Depth 10,900'				
Perforations 10932'-38'; 10,940'-43					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 17-1/2"	CASING & TUBING SIZE 13-3/8"		DEPTH SET 420'		SACKS CEMENT 450 sxs			
11"	9-5/8"		3,775'		1500 sxs			
8-1/2"	5-1/2"		10,990'		1910 sxs			
	2-7/8"		10,900'					

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 Tank 7-10-93	Date of Test 7-12-93	Producing Method (Flow, pump, gas lift, etc.) Swab Pumping	
Length of Test 8.5	Tubing Pressure 0	Casing Pressure 0	Choke Size
Actual Prod. During Test 157	Oil - Bbls. 157	Water - Bbls. 75	Gas - MCF 0

GAS WELL

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

VI. OPERATOR 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.

Signature
Frances M. Byers Sr. Engineering Tech
Printed Name
7-12-93
Date
713-296-6361
Telephone No.

OIL CONSERVATION DIVISION

AUG 06 1993

Date Approved
By
Title
Orig. Signed by
Paul Kautz
Geologist

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.