

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Plains Petroleum Operating Company		Well API No. 30-041-20852
Address 415 West Wall, Suite 1000, Midland, Texas 79701		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of: Lease name change from	
Recompletion <input checked="" type="checkbox"/> *	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	Bluitt San Andres 24 Sec 13 #6
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bluitt 13 Federal	Well No. 4366	Pool Name, Including Formation Bluitt San Andres Assoc.	Kind of Lease State, (Federal) or Fee	Lease No. NM-044210
Location Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West Line Section 3 Township 8S Range 37E , NMPM, Roosevelt 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"/>	Address (Give address to which approved copy of this form is to be sent)				
Phillip's 66 Pipeline (Truck)	P.O. Box 791, Midland, TX 79702				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
Warren Petroleum	P.O. Box 1589, Tulsa, OK 74102				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When?
		13	8S	37E	YES 10-28-93

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 09-04-93	Date Compl. Ready to Prod. 10-01-93		Total Depth 4820		P.B.T.D. 4610 CIBP			
Elevations (DF, RKB, RT, GR, etc.) GR 4016	Name of Producing Formation P1 San Andres		Top Oil/Gas Pay 4504		Tubing Depth 4468			
Perforations 4504-4577					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	513.71' KB	310 sx
7-7/8"	5-1/2"	4820' KB	1320 sx
	2-3/8"	4468	

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
		Casing Pressure	Choke Size
Length of Test	Tubing Pressure	Water - Bbls.	Gas - MCF
Actual Prod. During Test	Oil - Bbls.		

GAS WELL

Actual Prod. Test - MCF/D 2010.4	Length of Test 24hrs	Bbls. Condensate/MMCF 0	Gravity of Condensate
Testing Method (pilot, back pr.) BPR	Tubing Pressure (Shut-in) 1220	Casing Pressure (Shut-in)	Choke Size 6/64", 8/64", 10/64", 12/64"

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
Bonnie Husband

Printed Name
10-27-93

Date

Office Manager/Tech

Title
915/683-4434

Telephone No.

OIL CONSERVATION DIVISION

Date Approved **FEB 22 1994**

ORIGINAL SIGNED BY JERRY SEXTON

By **DISTRICT I SUPERVISOR**

Title