

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

Operator

El Ran, Inc.

Address

1603 Broadway, Lubbock, Texas 79401

Reason(s) for filing (Check proper box)

New Well



Change in Transporter of:

Recompletion



Oil



Dry Gas



Change in Ownership



Casinghead Gas



Condensate



Other (Please explain)

Hook Up Gas

If change of ownership give name  
and address of previous owner

## II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Sarah</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>Chaveroo (SA)</b>	Kind of Lease State, Federal or Fee <b>Fee</b>	Lease No.
Location				
Unit Letter <b>0</b>	<b>990</b>	Feet From The <b>South</b>	Line and <b>2200</b>	Feet From The <b>East</b>
Line of Section <b>3</b>	Township <b>8-S</b>	Range <b>32-E</b>	NMPM, <b>Chaves</b>	County

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Phillips Petroleum Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Box 791, Midland, Texas 79701</b>					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>Cities Service Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Box 300, Tulsa, Oklahoma 74102</b>					
If well produces oil or liquids, give location of tanks.	Unit <b>I</b>	Sec. <b>3</b>	Twp. <b>8-S</b>	Rge. <b>32-E</b>	Is gas actually connected? <b>Yes</b>	When <b>6/16/80</b>

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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

## 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

Agent

June 23, 1980

## OIL CONSERVATION DIVISION

APPROVED

BY

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.



**LTR**



**Job separation sheet**



1a. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>										7. Unit Agreement Name																													
b. TYPE OF COMPLETION NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>										8. Farm or Lease Name <b>Sarah</b>																													
2. Name of Operator <b>El Ran, Inc.</b>										9. Well No. <b>#1</b>																													
3. Address of Operator <b>1603 Broadway, Lubbock, Texas 79401</b>										10. Field and Pool, or Wildcat <b>Chaveroo</b>																													
4. Location of Well UNIT LETTER <b>0</b> LOCATED <b>990</b> FEET FROM THE <b>S</b> LINE AND <b>2200</b> FEET FROM THE <b>E</b> LINE OF SEC. <b>3</b> TWP. <b>8-S</b> RGE. <b>32-E</b> NMPM										12. County <b>Chaves</b>																													
15. Date Spudded <b>4/ 8/80</b>					16. Date F.P. Reached <b>4/16/80</b>					17. Date Compl. (Ready to Prod.) <b>4/18/80</b>					18. Elevations (DF, RKB, RT, CR, etc.) <b>4472 GR</b>					19. Elev. Casinghead <b>4472</b>																			
20. Total Depth <b>4390</b>					21. Plug Back F.P. <b>4387</b>					22. If Multiple Compl., How Many					23. Intervals Drilled By <b>0 - TD</b>					24. Retort-Tools <b>0 - TD</b>					25. Cable Tools														
24. Producing Interval(s), of this completion - Top, Bottom, Name <b>4172 - 4282 San Andres</b>															25. Was Directional Survey Made <b>NO</b>																								
26. Type Electric and Other Logs Run <b>Gamma Ray Neutron</b>															27. Was Well Cored <b>NO</b>																								
28. CASING RECORD (Report all strings set in well)																																							
CASING SIZE					WEIGHT LB./ FT.					DEPTH SET					HOLE SIZE					CEMENTING RECORD					AMOUNT PULLED														
8 5/8					23#					1682					12 3/4					550					0														
4 1/2					10.5#					4389					7 7/8					175					0														
29. LINER RECORD																														30. TUBING RECORD									
SIZE					TOP					BOTTOM					SACKS CEMENT					SCREEN					SIZE					DEPTH SET					PACKER SET				
																									2 3/8					4285 GR									
31. Perforation Record (Interval, size and number) <b>4172, 4179, 4196, 4198, 4228, 4238, 4242, 4249, 4264, 4275, 4277, 4282</b> <b>26 holes 1/2"</b>															32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL <b>4172 - 4282</b> AMOUNT AND KIND MATERIAL USED <b>6000 gal. 20% Acid</b>																								
33. PRODUCTION																																							
Date First Production <b>4/23/80</b>										Production Method (Flowing, gas lift, pumping - Size and type pump) <b>Pumping</b>										Well Status (Prod. or Shut-in) <b>Producing</b>																			
Date of Test <b>4/23/80</b>					Hours Tested <b>24</b>					Choke Size <b>2"</b>					Prod'n. Per Test Period <b>82</b>					Oil - Bbl. <b>40</b>					Gas - MCF <b>10</b>					Water - Bbl. <b>24</b>					Gas - Oil Ratio <b>24</b>				
Flow Tubing Press. <b>0</b>					Casing Pressure <b>20#</b>					Calculated 24-Hour Rate <b>82</b>					Oil - Bbl. <b>40</b>					Gas - MCF <b>10</b>					Water - Bbl. <b>24</b>					Oil Gravity - API (Corr.) <b>24</b>									
34. Disposition of Gas (Sold, used for fuel, vented, etc.) <b>Vented (To Be Sold)</b>															Test Witnessed By <b>Donnie Sooter</b>																								
35. List of Attachments <b>Hole Deviation - Logs</b>																																							
36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.																																							
SIGNED <b>W. W. Sooter</b>										TITLE <b>President</b>										DATE <b>April 25, 1980</b>																			

This form is to be filed with the appropriate District Office of the Commission not later than 30 days after the completion of any newly-filled or deepened well. It shall be accompanied by one copy of all electrical and radioactivity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths; in the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, zones 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. (See Rule 1105.)

### Southeastern New Mexico

T. Anhy _____	T. Canyon _____
T. Salt _____	T. Strawn _____
B. Salt _____	T. Atoka _____
T. Yates _____	T. Miss _____
T. 7 Rivers _____	T. Devonian _____
T. Queen _____	T. Silurian _____
T. Grayburg _____	T. Montoya _____
T. San Andres <u>3446</u>	T. Simpson _____
T. Glorieta _____	T. McKee _____
T. Paddock _____	T. Ellenburger _____
T. Blinberry _____	T. Gr. Wash _____
T. Tubb _____	T. Granite _____
T. Drinkard _____	T. Delaware Sand _____
T. Abc _____	T. Bone Springs _____
T. Wolfcamp _____	T. _____
T. Penn. _____	T. _____
T. Cisco (Bough C) _____	T. _____

### Northwestern New Mexico

T. Ojo Alamo _____	T. Penn. "B" _____
T. Kirtland-Prutland _____	T. Penn. "C" _____
T. Pictured Cliffs _____	T. Penn. "D" _____
T. Cliff House _____	T. Leadville _____
T. Menefee _____	T. Madison _____
T. Point Lookout _____	T. Elbert _____
T. Mancos _____	T. McCracken _____
T. Gallup _____	T. Ignacio Qtzte _____
Base Greenhorn _____	T. Granite _____
T. Dakota _____	T. _____
T. Morrison _____	T. _____
T. Todilto _____	T. _____
T. Entrada _____	T. _____
T. Wingate _____	T. _____
T. Chinle _____	T. _____
T. Permian _____	T. _____
T. Penn. "A" _____	T. _____

No. 1, from 4172 to 4282 No. 4, from.....to.....  
No. 2, from.....to..... No. 5, from.....to.....  
No. 3, from.....to..... No. 6, from.....to.....

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from ..... to ..... feet. ....

No. 2, from ..... to ..... feet. ....

No. 3, from ..... to ..... feet. ....

No. 4, from ..... to ..... feet. ....

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	400	400	Surface				
400	1800	1400	Red Bed, Sd				
1400	3446	2046	Anhy. Shale				
3446	4395	949	Dolo. & Anhy				