

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.G.	
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)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name Dachner	Well No. 8	Pool Name, including Formation Chaveroo (SA)	Kind of Lease State, Federal or Fee Federal	Lease # 13999
Location				
Unit Letter N : 990 Feet From The South Line and 2200 Feet From The West				
Line of Section 3 Township 8 South Range 32 East , NMPM, Chaves County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	P.O. Box 791, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Cities Services Company	P.O. Box 300, Tulsa, Oklahoma 74102
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When.
F 3 8-S 32E	yes 10/11/80

If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. R.
XX	XX							
Date Spudded 9/23/80	Date Compl. Ready to Prod. 10/11/80	Total Depth 4360 KB		P.B.T.D. 4357 KB				
Elevations (DF, RKB, RT, GR, etc.) 4482.1 GR	Name of Producing Formation San Andres	Top Oil/Gas Pay 4176		Tubing Depth 4292				
Perforations 4176, 86, 88, 92; 4224, 38, 57, 58, 60, 69, 74, 93, 95				Depth Casing Shoe 4360				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8" 23#		1707		550 sacks			
7 7/8	4 1/2" 10.5#		4360		175 sacks			
	2 3/8" 4.7#		4292		--			

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 of
able for this depth or be for full 24 hours)


Date First New Oil Run To Tanks 10/11/80	Date of Test 10/11/80	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 275	Casing Pressure 675	Choke Size 1 1/2"
Actual Prod. During Test 83	Oil-Bbls. 83	Water-Bbls. -0-	Gas-MCF 932

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

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)
Vice-President
(Title)
October 13, 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 deeper
well, this form must be accompanied by a tabulation of the device
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for all
wells on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of own
ership or other such changes of condition.