

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Exxon Corporation
Address
P.O. Box 1600, Midland, TX 79702

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)
Casinghead Gas MUST NOT BE
FLARED. 3/1/82
OTHER AN EXCEPTION TO RULE 1104
IS OBTAINED. from U.S.G.S.

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Wattam Federal	Well No. 3	Pool Name, including Formation Tom Tom San Andres	Kind of Lease State, Federal or Fee NM	Lease No. 15016
Location Unit Letter <u>F</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>6</u> Township <u>8-S</u> Range <u>31E</u> , NMPM, <u>Chaves</u> 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"/> Koch Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1558, Breckenridge, TX 76024
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent) Flared
If well produces oil or liquids, give location of tanks. Unit <u>F</u> Sec. <u>(Test tank)</u> Twp. <u></u> Rge. <u></u>	Is gas actually connected? <u></u> When <u></u>

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. Re. <input type="checkbox"/>
Date Spudded 11-16-81	Date Compl. Ready to Prod. 12-14-81	Total Depth 4016	P.B.T.D. 3958					
Elevations (DF, RKB, RT, GR, etc.) 4215 GR	Name of Producing Formation San Andres	Top Oil/Gas Pay 3672	Tubing Depth 3475					
Perforations 3672 - 3746 (22 shots)			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4	8 5/8	1260	850					
7 7/8	5 1/2	4016	1450					

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

Date First New Oil Run To Tanks 12-14-81	Date of Test 12-21-81	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test 34 bbls.	Oil-Bbls. 16	Water-Bbls. 18	Gas-MCF not measured

GAS WELL

Actual Prod. Test-MCF/D ---	Length of Test ---	Bbls. Condensate/MMCF ---	Gravity of Condensate ---
Testing Method (spot, 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.

E.H. Lowe
(Signature)
Sr. Administrator
(Title)
1-11-82
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 11 1982, 19 ____
BY Jerry Sexton
Orig. Signed By
TITLE Day 1. Sexton

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multi;

EXXON COMPANY, U.S.A.
POST OFFICE BOX 230 • MIDLAND, TEXAS 79702

MIDCONTINENT PRODUCTION DIVISION
MIDLAND DRILLING ORGANIZATION

H.G. DAVIDSON
DRILLING MANAGER

Dec. 1, 1981

LISTED BELOW ARE THE DEVIATION TESTS TAKEN ON WATTAM FEDERAL #3 :

<u>DEPTH</u>	<u>DEGREES OF DEVIATION</u>
171	1/4°
488	1/2°
976	1/2°
1245	3/4°
1772	3/4°
2715	3/4°
3180	3/4°
3603	3/4°
4016	3/4°

BY Pamela Mendenhall

SWORN TO and subscribed before me this 1st day of December, 1981

John F. Wood
Notary Public
Midland, Texas

My commission expires: 7-6-85

11-24-1991