NO. OF COP!		TIVEO		
DISTRI		1		
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U.\$.G.\$.				
LAND OFFICE				T
IRANSPORTER		OIL		
		GAS		
OPERATOR				
PROPATION OFFICE				T
Operator				
	West	tern	Res	erv
Address	P. (	). Bo	)x 2	188

١.

SANTA FE			REQUEST FOR ALLOWABLE  REQUEST FOR ALLOWABLE  Supersedes Old C-104 a					
FILE U.S.G.S.		ALITHODI 7	AND Effective 1-1-65 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
LAND OFFICE		AUTHORIZ	ATION TO TRA	NSPORT OIL AND	NATURAL G	AS		
TRANSPORTER	OIL							
OPER TOR	GAS		-					
PROPATION OFFI	CE							
Oberator			<del></del>					
		rves Oil Compar						
Address P. O.	. Box 218	88 Holbbs, New N	Mexico 88240	0				
Reason(s) for filing (C	heck proper l	box)		Other & Bleen	en mandalith in a	N SECTION SYSTEM		
New Well	3	Change in Tra	asporter of:	Origen of the con-	Sachi Gy	5/1/82	ACX.	
Recompletion		Cil	Dry Gas	s 🔲 💮		STONE WE CHANK	76	
Change in Ownership		Casinghead Ga	s Conden	sate 🗌 📉	2 All As	emil & IS		
If change of ownersh	up give name				0			
and address of previo	ous owner							
DESCRIPTION OF	.WELL AN	D LEASE						
Lesse Money rul	<del></del>		Name, Including Fo	ormation	Kind of Lease	<del></del>	Lease No.	
WWR234 Fede		6	Tom-Tom (Sar	n Andres)	State, (Federal	Federal	NM046153A	
Location			_					
Unit Letter	:_ <u>1</u>	980' Feet From Th	e S Line	e and <u>1980'</u>	Feet From T	he <u>W</u>		
Line of Section	34	Township 7-S	Range 3	le , nmp	M, Chaves		County	
<u> </u>				<del></del>	Chaves			
DESIGNATION OF	TRANSPO	ORTER OF OIL AND					<del></del>	
Name of Authorized T	_	Λ	isate [	<b>†</b>		ed copy of this form is to	i be sent)	
Matac Name of Authorized T	dor Pipe		or Dry Gas	P. O. Box 1	558 Brecker	ridge Texas	he senti	
	•						1	
If well produces oil or	r liquids.	Unit Sec.	Twp. P.ge.	Is gas actually connec	ted? Whe	n		
give location of tanks		K 1 34	. 7s: 31E	no	i	<b>=</b>		
If this production is COMPLETION DA		with that from any oth	ner lease or pool,	give commingling ord	er number:			
Designate Type	of Comple	etion - (X)	ll Gas Well	New Well Workover	Deepen	Plug Back   Same Res	v. Diff. Res'v.	
		X	In Drad	Total Donth	<u></u>	D D T D		
Date Spudded	01	Date Compl. Ready	to Prod.	Total Depth		P.B.T.D.		
Elevations (DF, RKB,		12-6-81 Name of Producing	Formation	3,975 Top O!l/Gas Pay	<del></del>	3,958 Tubing Depth		
ĺ	1' GR.	San Andre	ac .	3809		2 020		
Perforations						Depth Casing Shoe		
3809-	-3912	39 shots						
HOLES			NG, CASING, AND UBING SIZE	DEPTH		SACKS CEM	FNT	
12 1/		0 5 /0"	OBING SIZE			700 sx circulated		
7 7/		4 1/2"		1495' 3983'		300 sx		
		2 3/8"		3930'				
				<u>.</u>		<u> </u>		
	REQUEST	FOR ALLOWABLE	, (Test must be of able for this de	fter recovery of total vo pth or be for full 24 hou		nd must be equal to or e:	reced top allow-	
OIL WELL Date First New Oil Ri	un To Tanks	Date of Test		Producing Method (Fi		, eic.)		
12-6-	-81	12-18-81	1	Swabbin	<b>a</b>			
Length of Test		Tubing Pressure		Casing Pressure		Choke Size		
24 hc		N/A		N/A Water - Bble.		N/A Gga·MCF		
Actual Pred, During T 20 bb		10 bbls.						
	713.	10 0015.		10 bbls.		1 11	J	
GAS WELL								
Actual Prop. Test-Mo	CF/D	Length of Test		Bbls. Condensate/MM	CF	Gravity of Condensate		
	-				<del> </del>			
Teating Method (pitot	, back proj	Tubing Pressure ( &	hut-in }	Casing Pressure (65%	t-1n)	Choke Size	ļ	
	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~				CONSERVA	TION COMMISSION		
CERTIFICATE OF	COMPLM	INUE		il Oil			4	
I hereby certify that	the rules as	d regulations of the (	Dil Conservation	APPROVED	MAR	1982	19	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given is to e and complete to the best of my knowledge and belief.		BY ORIGINAL SIGNED BY						
above is true and complete to the best of my knowledge and belief.		JE	RRY SEXTON					
	7	•		TITLE				
Va 7	(/2-	,, , , ,				ompliance with RULE		
loce 7 Januares			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					
/	// (S	ignatwe)		tests taken on the	tests taken on the well in accordance with RULE 111.			
(Title)				All sections sble on new and	of this form mus	it be filled out comple lis.	tely for allow-	
(11116)			HOIC OR HOW HUG		and Ut for chee	size of owner		

(Date)

File out only Sections I. H. 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 multiply condition wells.

RECEIVED

FEB 26 1982

O.C.D. HOBBS OFFICE



## DRILLING CO., INC .- OIL WELL DRILLING CONTRACTORS

P. O. Box 2055 ROSWELL, NEW MEXICO 88281 TELEPHONES: ARTESIA 505/746-6757 ROSWELL 505/623-5070

November 17, 1981

Western Reserve Oil Co. Box 993 Midland, Texas 79702

Re: Federal 34 #6

## Gentlemen:

The following is a Deviation Survey of the above well located in Chaves County, New Mexico.

487' - 1/2 <sup>0</sup>	2251' - 1/2°
978' <b>-</b> 1/2 <sup>0</sup>	2747 <b>' -</b> 1/2 <sup>0</sup>
1295' <b>-</b> 1/2 <sup>0</sup>	3226' - 1/2 <sup>0</sup>
1495' - 3/4°	3690' - 1/2°
1756' - 1/2 <sup>0</sup>	3975' - 3/4°T.D.

yours very truly,

WEK\_DRILLING CO., INC. Arnold Newkirk

STATE OF NEW MEXICO ) COUNTY OF CHAVES

17 day

nda Bea Newton of Josepher, 1981 by Arnold Newkirk.

My commission Expires:

pul 10, 1984