

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

APPLICANT'S ADDRESS	
CITY	
STATE	
ZIP	
DATE OF FILING	
WELL NO.	
WELL NAME	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	

EL RAN, INC.
Address
P. O. BOX 911, LUBBOCK, TEXAS 79408

Reason(s) for filing (Check proper box):
 New Well
 Recombination
 Change in Ownership
 Change in Transporter of: Oil Dry Gas
 Casinghead Gas Condensate
 Other (Please explain): CASINGHEAD GAS MUST NOT BE
 11-8-84

DESCRIPTION OF WELL AND LEASE
 Well Name: GRIFFIN
 Well No.: 2
 Pool Name, including Formation: CHAVEROO (SA)
 Kind of Lease: State, Federal or Fee: FEE
 Location: Unit Letter: D, 990 Feet From The West Line and 660 Feet From The North
 Line of Section: 10, Township: 8 South, Range: 32 East, NMPM, Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil: PHILLIPS PETROLEUM
 Address (Give address to which approved copy of this form is to be sent): 4001 Penbrook, Odessa, Texas 79762
 Name of Authorized Transporter of Casinghead Gas: or Dry Gas: Address (Give address to which approved copy of this form is to be sent):

Well produces oil or liquids, or location of tanks: Unit: C, Sec: 10, Twp: 8-S, Rge: 32E
 Is gas actually connected? No

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. Fr.
	X		X				
Date Spudded: 8/28/83	Date Compl. Ready to Prod.: 9/9/83	Total Depth: 4330 KB		P.B.T.D.: 4322			
Productions (DF, RKB, RT, CR, etc.): 4489 GL	Name of Producing Formation: San Andres	Top Oil/Gas Pay: 4174		Tubing Depth: 4280			
Productions: 4174, 78, 82, 86, 88, 4200, 02, 04, 36, 38, 47, 64, 66, 70		4272, 76, 78, 84		Depth Casing Shoe: 4329			
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT			
12 1/2	8 1/2	1715		575 sks			
7 7/8	4 1/2	4330		300 sks			

TEST DATA AND REQUEST FOR ALLOWABLE (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)

First New Oil Run To Tanks: 9/8/83
 Date of Test: 9/8/83
 Producing Method (Flow, pump, gas lift, etc.): Flowing
 Length of Test: 24 hrs
 Tubing Pressure: 30
 Casing Pressure: 385
 Choke Size: 1"
 Actual Prod. During Test: 76
 Oil-Bbls.: 37
 Water-Bbls.: 39
 Gas-MCF: TSTM

TEST WELL
 Actual Prod. Test-MCF/D: Length of Test: Bbls. Condensate/MMCF: Gravity of Condensate:
 Testing Method (prior, 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 herein is true and complete to the best of my knowledge and belief.
 [Signature]
 Vice-President
 September 14, 1983

OIL CONSERVATION DIVISION
 APPROVED: SEP 22 1983
 BY: OIL & GAS INSPECTOR
 ORIGINAL SIGNED BY EDDIE SEAY
 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 deviated 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 conditions.
 Separate Forms C-104 must be filed for each pool in multiple completed wells.

PHOTODUPLICATION SERVICE
UNIT 1
10705-2000 BLDG 3 LIC

RECEIVED
SEP 21 1983
O.C.D.
HOBBS OFFICE