

RECORD OF DEVIATION TESTS

GREAT WESTERN DRLG. COMPANY

E. L. HARROD NO. 1

SECTION 7, T-16-S, R-35-E, LEA COUNTY, NM

<u>Depth</u>	<u>Deviation</u>	<u>Depth</u>	<u>Deviation</u>
310	1½	7,106	1½
859	1	7,522	3/4
1,300	1	8,016	1
1,769	3/4	8,525	1/4
2,045	1/4	8,995	1/2
2,543	1/2	9,468	1
3,012	1	9,595	1
3,275	3/4	10,065	1½
3,755	1	10,270	3/4
3,900	3/4	10,724	1½
4,275	1	10,874	1½
4,660	1	11,258	1 3/4
5,114	1	11,763	1½
5,618	1/2	12,025	2
6,119	3/4	12,297	2
6,678	1	12,610	1
		12,962	1

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TRANSPORTER	OIL GAS
OPERATOR	
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Great Western Drilling Company
Address
Box 1659, Midland, Texas 79701
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)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name E. L. Harrod	Well No. 1	Pool Name, including Formation Undesignated (Canyon)	Kind of Lease State, Federal or Fee Fee
Location Unit Letter I ; 1980 Feet From The South Line and 660 Feet From The East Line of Section 7 , Township 16-S Range 35-E , NMPM, Lea 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"/> Amoco Production Company	Address (Give address to which approved copy of this form is to be sent) Box 1183, Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, Oklahoma 74102					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 7	Wpt. 16-S	Rge. 35-E	Is gas actually connected? Yes	When

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12-09-72	Date Compl. Ready to Prod. 2-24-73		Total Depth 13,060'		P.B.T.D. 11,327'			
Foot 4,039.9' GR	Name of Producing Formation Canyon Lime		Top Oil/Gas Pay 11,012'		Tubing Depth 11,012'			
Perforations 11,268' to 11,291'					Depth Casing Shoe 11,382'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17"	13-3/8"		306'		370			
11"	8-5/8"		4,660'		200			
7-7/8"	4-1/2"		11,382'		300			
	2-3/8"		11,012'					

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 2-25-73	Date of Test 4-03-73	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure Start 1,280, End 780	Casing Pressure Packer	Choke Size 16/64
Actual Prod. During Test	Oil-Bbls. 273.24	Water-Bbls. 0	Gas-MCF 400.8

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

W. H. Hunsaker
(Signature)
Chief Engineer
(Title)
4/11/73
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19_____
BY **John D. King**
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 Sections I, II, III, and VI only 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 completed wells.