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

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LAND OFFICE			
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LAMO OFFICE	· · -	R ALLOWABLE					
CFF MAT-ON	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
Operation OFFICE	<u></u>						
SHELL WESTERN EAP INC	· · · · · · · · · · · · · · · · · · ·						
P. O. BOX 576, HOUSTO	ON, TEXAS 77001 (WCK 4435)						
neason(s) for filing (Check proper b	Change in Transporter of:	OTHER (Please explain) FORMER TRANSPORTER OF OIL: WESTERN					
Recompletion	011 X Dry C						
Change in Ownership	Casingheod Gas Conde	rnadie .					
If change of ownership give name and address of previous owner			 				
DESCRIPTION OF WELL AN	D LEASE Well No. Pool Name, Including F	Formation Kind of Lease Lease No.					
STATE D	1 MALJAMAR (G/SA	A) .	State, XXXXX	(XX XX	B2516		
	980 Feet From The <u>EAST</u> Lir	ne and <u>660</u>	Feet From T	south			
	r. mahip 17-S Ronge	33-Е , мири		LEA	Count		
	7-1		<u> </u>				
DESIGNATION OF TRANSPO Name of Authorized Transporter of C	RTER OF OIL AND NATURAL GA	AS Access (Give address)	o which approv	red copy of this form is	to be sent)		
PRIDE PIPELINE COMPANY	Casineneed Gas (X) or Dry Gas	BOX 2436, ABILENE, TX 79604 Address (Give address to which approved copy of this form is to be sent)		sa he senti			
PHILLIPS PIPE LINE COM		4001 PENBROOK, ODESSA, TX 79762					
if well produces oil or liquids, give location of tenks.	Unit , Sec. Twp. Rec	Is gas octupilly connected	: Whe</td <td></td> <td></td>				
If this production is commisgled to COMPLETION DATA	with that from any other lease or pool,	give commingling order	number				
Designate Type of Comple	tion — (X)	New Well Warkover	Deepen	Plug Beer Same R	esty. Dill. Res		
Dete Spinsed	Dete Compl. Recay to Prod.	Total Depth	_i	P.B.T.D.			
Laveuma (DF, RKB, RT, CR, etc.	Name of Producing Formation	Top CII/Gas Pay	· · · · · · · · · · · · · · · · · · ·	Tubing Depth			
- Perforations				Depth Casing Shoe			
	TURNO CASING AND	D CENEUTING BECOR		<u> </u>			
HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET SACKS CEMENT		MENT			
TEST DATA AND REQUEST	FOR ALLOWARIE (Test must be a	fter recovery of total value	ne of load oil a	i and must be equal to o	exceed top all:		
OIL WELL Date First New Oil Run To Tanks		Producing Method (Flow	,				
Date first New Cli Run 15 Junus		·					
Length of Test	Tubing Pressure	Casing Preseure	•	Choke Size			
Actual Prod. During Test	Cil-Bbis.	Water-Bble.		Gas-MCF			
GAS WELL Artual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	7	Gravity of Condensa	1.0		
Teating Method (pitot, back pr.)	Tubing Presswe (Shat-in)	Casing Pressure (Shat-	-in)	Choke Sixe			
CERTIFICATE OF COMPLIA	NCE	CIL CI	DNSERVAT	100 DIVISION 1986			
		APPROVED	JAN Z	1300	22		
relation have been compiled wi	d regulations of the Oil Conservation th and that the information given be heat of my knowledge and belief.	.BY					
cave is true and complete to the best of my knowledge and belief.		ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT I SUPERVISOR					
11.10-	1:	This form is to	te filed in c	ompliance with nut	E 1104.		
Table (us	le for A. J. FORE	If this is a requ	he accompan	able for a newly dri	lled or deepend of the deviation		
SUPERVISOR REG. & PERMITTING		well, this form must be accordance with MULE 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 owns well used or number, or transporter, or other such change of must be med to must be a most to must be accordance.					
) JANUARY							
• ''	Date)			er, or other such cha- he filed for each			