

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF PRODUCTION PERMITS	
ESTABLISHMENT	
DATE	
FILE	
WELL NO.	
LAND OFFICE	
TRANSPORTER	
OIL	
NATURAL GAS	
OPERATION	
PERMITS OFFICE	

Shell Oil Company

P.O. Box 991, Room 237 T&C, Houston, TX 77001

Reason(s) for filing (Check proper box)	X Change well name to conform to other wells on same lease	Other (Please explain)
New Well	☐	Oil ☐ Dry Gas ☐
Recompletion	☐	Costinghead Gas ☐ Condensate ☐
Change in Ownership	☐	Formerly: State D 11 No. 1

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Lease Name	State D	1	Maljamar G/SA	State, Federal or Fee State	B2516
Location					
Unit Letter	0	: 1980	Feet From The East	Line and 660	Feet From The South
Line of Section	11	Township	17S	Range	33E
NMPM. Lea County					

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil ☒ or Condensate ☐	Western Transportation Company	P.O. Box 838 Hobbs, NM 82840	
Name of Authorized Transporter of Costinghead Gas ☒ or Dry Gas ☐	Phillips Pipe Line	4001 Penbrook, Odessa, TX 79760	
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 11	Twp. 17S
		Rge. 33E	Is gas actually connected? Yes
			When 9/1/78

If this production is commingled with that from any other lease or pool, give commingling order number:

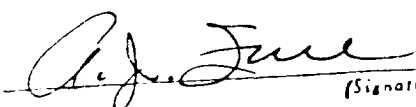
COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
Perforations				Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET				SACKS CEMENT			

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 oil tests taken on the well in accordance with RULE 111.)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL		Ebls. Condensate/MCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test		
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

I. 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.



A. J. Fore

Senior Engineering Technician

5/20/80

(Date)

OIL CONSERVATION DIVISION

APPROVED

BY

Drig. Signed by
Terry Sexton
Dist. 1. Supv.

TITLE

This form is to be filled in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out only for a well on new and recompleted wells.

Fill out only Sections I, II, III, and IV. If the well name or number, or transporter, or other information is not complete, Form C-104 must be filled out and filed in the well file.