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LAND OFFICE		<u></u>		
IRANSPORTER	OIL			
	GAS			
OPERATOR				
		1		

NEW MEXICO OIL CONSERVATION COMMISS IN REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-65

	FILE U.S.G.S. LAND OFFICE IHANSPORTER GAS OPERATOR	AUTHORIZATION TO TRA	AND NSPORT OIL AND NATURAL (-	GAS		
ı.	PRORATION OFFICE					
	Shell Oil Company	**************************************				
	Acdress P. O. Box 1509, Midland, Texas 79702					
	Reason(s) for filing (Check proper box)	Character of		Other MEAST NOT BE		
	New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Ga Casinghead Gas Conder	balos an e	XCEPTION TO R-4070		
	If change of ownership give name and address of previous owner		PLACED IN THE POOT			
BOTIEY THIS OFFICE						
II. DESCRIPTION OF WELL AND LEASE Lease Name						
						1 -
	Line of Section 11 Tow	mship 17S Range 3	3Е , ммрм, Lea	County		
ц.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	AS Address (Give address to which appro	wed conv of this form is to be sent)		
	N== of Authorized Transporter of Oil Western Oil Transportati	or Condensate	P O Box 838 Hobbs N	м 88240		
	None of Authorized Transporter of Cas	inghead Gas Cr or Dry Gas C	Address (Give address to which approved copy of this form is to be sent)			
	Not connected	Unit Sec. Twp. Pge.	Is gas actually connected? Wh	nen		
	If well produces oil or liquids, give location of tanks.	0 11 17S 33E		soon as possible		
v.	If this production is commingled wit COMPLETION DATA	h that from any other lease or pool,	give commingling order number: New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completion	n – (X) X	X			
	Date Spuddod	Date Compl. Ready to Prod.	Total Depth 4715	P.B.T.D.		
	2-25-78 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth 4644'		
	4154.8 GR	Grayburg-San Andres	4593'	Depth Casing Shoe		
	4446-4586, 4630-4658'					
		TUBING, CASING, AN	D CEMENTING RECORD DEPTH SET	SACKS CEMENT		
	12 1/4"	8 5/8"	415'	340		
	7 7/8"	5 1/2"	4709	1350		
	5 1/2"	2 3/8"				
v.	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-aliouable for this depth or be for full 24 hours) OIL WELL					
	Date First New Oil Run To Tanks	Date of Test 4-23-78	Preducing Method (Flow, pump, gas I Pumping	iji, etc.)		
	4-17-78 Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	24 hrs	Oii - Bblo.	Water-Bble.	Gas-MCF		
	Actual Pred. During Tool	26	27	20		
	CACULTY					
	GAS NELL Actual Fred, Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate 36.4		
	Teating Mathad (pitot, back pr.)	Tubing Processe (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
<i>ι</i> 1.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVATION COMMISSION			
	I hereby certify that the rules and	regulations of the Oil Connervation	APPROVED	APPROVED 19		
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED WATER OF LISTANDER APPROVED TIPLE				
			The form is to be filed in compliance with RULE 1104.			
Senior Drilling Engineer (Title)		If this is a request for allowable for a newly difficing deepened				
		All protions of this form must be filled out completely for allow able on new and recompleted walls.				
					(Date)	
	(+)	····	ii			