

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator	SOHIO PETROLEUM COMPANY, ATTN: PRODUCTION WEST (2nd FLOOR)		
Address	P. O. BOX 4587, HOUSTON, TEXAS 77210		
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Request for test allowable	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	3000 Bbl (stored in frac tanks)	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Dry Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name	STATE 36	Well No.	1	Pool Name, Including Formation	SHIPP STRAWN	Kind of Lease	State, Federal or Fee	STATE	Lease No.	VB-155
Location	Unit Letter <u>E</u> : <u>710</u> Feet From The <u>west</u> Line and <u>2110</u> Feet From The <u>north</u>									
Line of Section	36	Township	16S	Range	37E	, NMPM,		Lea	Coun	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
TEXACO TRADING & TRANSPORTATION, INC.	P.O.BOX 6196, MIDLAND, TX 79711-0196					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
PHILLIPS 66 NATURAL GAS COMPANY	4001 PENBROOK, ODESSA, TEXAS 79762					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	E	36	16S	37E	No	est. 8/1/88

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Re
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
4/23/88	6/3/88		11,975'		11,930'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3554' GRL	STRAWN		11,573		EOT @ 11,544			
Perforations					Depth Casing Shoe			
11,621' - 11,667' @ 2 SPF					11,974'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	407'	400 sx
11"	8-5/8"	4503'	1735 sx
7-7/8"	5-1/2"	11975'	775 sx
5-1/2" CSG	2-7/8"	11512' (PKR)	PKR @ 11,512'

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
6/3/88	6/9/88	swabbing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
8 hours	0	0	N/A
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
114	60	54	est 200

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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 above is true and complete to the best of my knowledge and belief.

Gary R. B. Campbell

(Signature)

SR. PRODUCTION ENGINEER

(Title)

7/5/88

OIL CONSERVATION DIVISION

APPROVED JUL 11 1988, 19

BY _____

TITLE _____

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

If this is a request for allowable for a newly drilled or deepen 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 all wells on new and recompleted wells.

Fill out only Sections I, II, III, and IV for new wells.