50, 1 1		L	
DISTRIBUTION		1	
SANTA FE			
FILE			
U.S.G.S.		<b> </b>	
LAND OFFICE		<b></b>	
IRANSPORTER	OIL		
	GAS		
OPERATOR		<b> </b>	
PRORATION OFFICE		<u> </u>	

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(Dule)

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURA

:	Poim C-104 Supersede Old C-104 and C-C Ellective 1-1-65
AL GAS	S
	,
"B"_2	2
2	
Lease	Lease No.
XXXXXX	Fee
from Th	• East
	LEA County
	d copy of this form is to be sent)
	y 70702 d copy of this form is to be sent)
When I	NA
 r:	
en i	Plug Back   Same Hes'v. Diff. Res
i	P.B.T.D.
	Tubing Depth
	Depth Casing Shoo
	SACKS CEMENT
-	
	Language dan ali
gas lift	nd must be equal to ar exceed top ali
	Choke Size
	Gas-MCF
	Gravity of Condensate
	Choke Size
	TION COMMISSION
<u>B</u> 1	1980
rig. Sig	ned by
erry Ser <u>jet 1. S</u>	

LAND OFFICE	Ad Michigan Land		-			
TRANSPORTER OIL GAS						
OPERATOR						
PRORATION OFFICE						
SHELL OIL COMPANY	77001					
P. O. BOX 991, HOUSTON,	TEXAS 77001	Other (Pleas	e explain)			
Reason(s) for filing (Check proper box)	Change in Transporter of	FORMERLY	(:			
Recompletion	OII Dry C		Grimes "B"	2		
Change In Ownership X	Cusinghious Cos []		<del></del>			
change of ownership give name nd address of previous owner	Gulf Oil Corp. P.O. Box	c 1150 Midland, T	X 79702			
DESCRIPTION OF WELL AND L	EASE.   Well No.   Ropl Name, Including	Formation	Kind of Lease	i i	No.	
Lease Name	1 c/s/	A	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	yor Fee		
N.Hobbs(G/SA)Unit Sec. 3	7-1-1-1	660	Feet From T	he Fast		
Unii Letter;19	80 Feet From The North L	Ine and <del>860</del>			- •	
Line of Section Town	nship 18S Range	38Е , имри	Л.	LEA Co.	unty	
DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL O	GAS Andress (Give address	to which approv	ed copy of this form is to be sent)		
Neme of Authorized Transporter of Off	or Condensate					
Shell Pipeline	nghead Gas Or Dry Gas			ed copy of this form is to be sent)		
Phillips Pipelir	ne	4001 Penbrook	St. Odessa	a. TX 79/62		
If well produces oil or liquids,	Unit Sec. Twp. Pge.	YES		NA		
give location of tanks.  If this production is commingled with	n that from any other lease or poo	ol, give commingling ord	er number:			
COMPLETION DATA	Oil Well Gas Well		Deepen	Plug Back   Same Hesty, Diff.	H.e.z	
Designate Type of Completion	n – (X)	Total Depth		P.B.T.D.		
Date Spudded	Date Compl. Ready to Prod.			Tubing Depth		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Depth Casing Shoe		
Perforations				J. S. P. L.		
	TUBING, CASING, A	ND CEMENTING RECO	ORD	SACKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE	DEPTH	SET	SACKS CEMENT		
NOCE THE SECOND						
				and must be equal to or exceed to	p ali	
TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be able for this	. A . n . A . D . D . J	D /	and must be equal to at exceed to		
OIL WELL  Date First New Oil Run To Tanks	Date of Test	Producing Method (Fi	ow, pump, gas li	ift, etc.)		
Date First New Off Num 20 1255		Cosing Pressure		Choke Size		
Length of Test	Tubing Pressure			Gas-MCF		
Actual Pred. During Test	Oil-Bbls.	Water-Bbls.				
			•			
The survey of				Gravity of Condensate		
GAS WELL Actual Frod, Tool-MCF/D	Length of Test	Bbls. Condensate/Aff				
Testing hiothod (pitot, back pr.)	Tubing Pressure (Shut-1u)	Cosing Pressure (Sh		Choke Size		
The sount IAN	CF	OIL	_ CONSERV	ATION COMMISSION		
CERTIFICATE OF COMPLIAN		APPROVED	FEB	1 1980		
I hereby corlify that the rules and	regulations of the Oil Conservation give	ven	Drig. S	igned by		
I hereby certify that the rules and regulations of the order and complete with and that the information given commission have been complete with and that the information given above is true and complete to the best of my knowledge and belief.		lef. BY	Jerry Sexton			
		TITLE	Dist 1.			
		This form is	to be filled in	compliance with RULE 1104.	ccb.	
(1. ). Jul		well, this form r	This form is to be from in companied for a newly diffied or deeps If this is a request for allowable for a newly diffied or deeps well, this form must be accompenied by a tabulation of the devia well, this form must be accompenied by a tabulation of the devia tests taken on the well in accordance with RULE 111.			
(Signature)		tests taken on t	of this form m	nust be filled out completely fo	T A	
A. J. FORE, SENIOR ENGINEERING TECHNICIAN (Tule)		*ple on now eur	All sections of this parties.  able on now and recompleted walls.  Fill out only Englished 1. II, III, and VI for changes of average of conditions or number, or transporter, or other such change of conditions.			
JANUARY 25, 1980	hugh .	Well name or nu	iy Souttons L inher, or transpr	sten or other such change of co	il.n.	
	)u(•)	11				