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

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

REG-100
Supersedes REG-100 and
REG-100-1-1-65

Creditor Shell Oil Company

Address P. O. Box 991, Houston, TX 77001

Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of ☐
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐
Other (Please explain) Formerly: State A #3

If change of ownership give name and address of previous owner Shell Oil Company P.O. Box 576, Houston, TX 77001

DESCRIPTION OF WELL AND LEASE
Lease Name N.Hobbs(G/SA)Unit Sec. 32
Well No. 421
Pool Name, including Formation G/SA
Kind of Lease
State, XXXXXXXXXXXX
Location
Unit Letter H : 2310 Feet From The North Line and 330 Feet From The East
Line of Section 32 Township 18S Range 38E, NMPM, Lea

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Shell Pipeline
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Phillips Pipeline
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. NO CHANGE
Is gas actually connected? Yes When NA
Address (Give address to which approved copy of this form is to be sent) P.O. Box 1910 Midland, TX 79702
Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St. Odessa, TX 79762

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

COMPLETION DATA
Designate Type of Completion - (X) -
Date Spudded
Date Compl. Ready to Prod.
Total Depth
P.B.T.D.
Elevations (DS, RNB, 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 of cable 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.)
Length of Test
Tubing Pressure
Casing Pressure
Choke Size
Actual Prod. During Test
Oil - Bbls.
Water - Bbls.
Gas - MCF

GAS WELL
Actual Prod. Test-MCF/D
Length of Test
Bbls. Condensate/MMCF
Gravity of Condensate
Testing Method (pilot, 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 Commission 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
January 25, 1980

OIL CONSERVATION COMMISSION
FEB 1 1980
APPROVED
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 deep well, this form must be accompanied by a tabulation of the flow tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all on new and recompleted wells.
This form is to be filed in the Oil Conservation Commission file for the well or in the file for the lease or in the file for the field.