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U.S.G.S.		<u> </u>	
LAND OFFICE		<u> </u>	<u> </u>
INANSPORTER	OIL		l
	GAS		
OPERATOR			↓
PRORATION OFFICE		1	<u> </u>

NEW MEXICO OIL CONSERVATION COMMISSION : REQUEST FOR ALLOWAE

Poim C-104 Superardes Old C-104 and Effective 1-1-65

U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
LAND OFFICE			-			
TRANSPORTER GAS						
PRORATION OFFICE						
SHELL OIL COMPANY						
Address NOV 001 HOUSTON	TEXAS 77001					
P. O. BOX 991, HOUSTON, Reason(s) for filing (Check proper box)	I DATE TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE T	Other (Please		,		
New Well	Change in Transporter of	FORMERLY	•			
Recompletion Change in Ownership X	OII Dry Gas Casinghead Gas Condense	Berry #	3			
f change of ownership give name sind address of previous owner	hell Oil Co . P.O. Box 57	76 Houston, TX	77001			
DESCRIPTION OF WELL AND L	EASE Lecturing For	mation	Kind of Lease	Lease		
Lease Name	G/SA			KX Fee		
N.Hobbs(G/SA)Unit Sec. 31	70 Feet From The North Line	and 330	Feet From Th	he <u>East</u>		
Unit Letter;27/	C Feet From The HOT CIT LINE			LEA Cou		
Line of Section 31 Town		38E , NMPH	-			
DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address	to which approve	ed copy of this form is to be sent)		
Nome of Authorized Transporter of Oil (Shell Pipeline		P.O. Box 1910	Midland, I	y 79702		
Name of Authorized Transporter of Casi	er of Casinghead Gas Cor Dry Gas (1997)					
Phillips Pipelin		Is gas actually connected? When				
If well produces oil or liquide,	NO CHANCE	Yes NA				
If this production is commingled with COMPLETION DATA	that from any other lease or pool, g	New Well Workover	Deepen	Plug Back Same Res v. Diff.		
Designate Type of Completion		! !		P.B.T.D.		
Date Spudded	Date Compl. Ready to Prod.	Total Depth				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay		Tubing Depth		
Perforations				Depth Casing Shoe		
	TUBING, CASING, AND	CEMENTING RECO	RD			
	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT		
HOLE SIZE						
				1		
TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a)	fier recovery of total vo pth or be for full 24 hou	lums of load oil: ers)	and must be equal to or exceed to		
OIL WELL	Date of Test	Preducing Method (File	ow, pump, gas li	fi, etc.)		
Date First New Oil Run To Tanks				Choke Size		
Length of Test	Tubing Pressure	Cosing Pressure		Gas-MCF		
Actual Prod. During Test	Oil-Bbls.	Water - Hbls.				
	.1					
GAS WELL	Length of Test	Bbls. Condensate/Ac.	ACF.	Gravity of Condensate		
Actual Prod. Test-MCF/D		Cosing Pressure (Shut-in)		Choke Sixe		
Testing kinthod (pitot, back pr.)	Tubing Presewe (Shot-in)					
CERTIFICATE OF COMPLIAN	CE	OIL CONSERVATION COMMISSION				
I hereby cortify 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.		APPROVED	APPROVED			
		Orig. Signed by				
		11	Dist 1, Sugar			
		TITLE This form is to be flied in compliance with RULE 1104.				
		This form is	couest for alle	powhle for a newly difficult or d		

(Signature)

A. J. FORE, SENIOR ENGINEERING TECHNICIAN (Title)

JANUARY 25, 1980

(Dute)

If this is a request for allowable for a newly difficd or do well, this form must be accompenied by a tabulation of the detects taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely to able on now and recompleted wells.

Fill out only Sections I. II, III, and VI for changes of well name or number, or transporter, or other such change of co