		•			
F A II	BTATE OF NEW MEXICO ERGY AND MINERALS DEPARTMENT			Form C-10+ Revised 1C78	
LNI	OIL CONSERVA		VIION DIVISION		
	0161 A IR UT IOH	P. O. DO SANTA FE, NEV	V MEXICO 87501		
			•		
	REQUEST FOR ALLOWABLE				
	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
1.					
	Shell Western E&P, Inc.				
	200 North Dairy Ashford, P.O. Box 991, Houston, Texas 77001				
	Neason(s) for filing (Check proper box) Other (Please explain)				
	New Well Change in Transporter al: Recampletion Dil Dry Gas				
	Change in Ownership Casinghead Gas Condensaie				
	If change of ownership give name Shell Oil Company, P.O. Box 991, Houston, Texas 77001				
11.	DESCRIPTION OF WELL AND	LEASE MAL			
•	State A LOOALT	Hobbs Blinebry			
	Location	·			
•	Unit Letter <u>G</u> ; 193	D Feet From The North Lin	• and Feet From *	n. East	
	Line of Section 32 T.	mahip 185 ' Range	<u>38F , NMPM,</u> Lea	Count	
÷	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
-	Norre of Authorized Transporter of Cil X or Condensate		Ascress (Give address to which approved copy of this form is to be sent) P.O. Box 1910 Midland, TX 79702		
	Shell Pepeline CO Name of Authorized Fransporter of Casinghead Gas M or Dry Gas		Address (Give address to which approved copy of this form is to be sent)		
	Phillips Pipeline Compan	y GPM Gas Corporation	4001 Penbrook St. Odess		
	if well produces oil or liquids, give location of tanks.	No Change	Yes	_ <u>NA</u>	
- [.]		th that from any other lease or pool,	give commingling order number:	· · · · · · · · · · · · · · · · · · ·	
÷.	Designate Type of Completion	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Dill. Res'	
	Designate Type of Completic	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
		Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Lievations (DF, RKB, RT, GR, etc.)			Depth Casing Shoe	
	Perforations Lepis Casing Snow				
			CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
•			<u> </u>		
v	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to ar exceed top allo oil well				
	OIL WELL Bale for this dep Date First New Oil Run To Tanks Date of Test		Producing Mathod (Flow, pump, gas lift, etc.)		
-	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
-				Gas-MCF	
	Actual Prod. During Test	Oil-Bhie.	Water-Bbis.	·	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/AMCF	Cravity of Condensate	
	Testing Method (pitat, back pr.)	Tubing Pressure (Shnt-18)	Caeing Pressure (Sbat-in)	Choze Size	
٦.	CERTIFICATE OF COMPLIANCE		APPROVED JAN 26 1984		
	Division have been complied with	reby certify that the rules and regulations of the Oil Conservation sion have been complied with and that the information given			
	abave is true and complete to the best of my knowledge and belief.		BY ORIGINAL SIGNED BY JEPRY SEXTON		
	KIA Dawson		TITLE		
	V dansa Minus			whin for a newly drilled or denven	
	Attompor in East		If this is a request for allocation of y a tabulation of the deviation well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for allo able on new and recompleted wells. Fill out only Sections 1. II. III, and VI for changes of own well name or number, or transporter, or other such change of condition		
	Attorney-in-Fact (Tule)				
	December 1, 1983 Effective January 1, 1984				
	. (Du	ue)	Separate Forms C-104 must be filed for each post in multip completed wells.		