STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator: Shell Oil Company

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

Reason(s) for filing (Check proper box)
- New Well [X]
- Recompletion [ ]
- Change in Ownership [ ]
- Change in Transporter of: Oil [ ] Dry Gas [ ] Casinghead Gas [ ] Condensate [ ]

Other (Please explain):

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

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
N. Hobbs (G/SA) Unit Sec.24	242	Hobbs (G/SA)	State, ~~Federal or Fee~~	

Location: Unit Letter N : 1300 Feet From The South Line and 2600 Feet From The West

Line of Section 24 Township 18S Range 37E , NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Shell Pipe Line	P. O. Box 1910, Midland, TX. 79702
Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ] GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent)
Phillips Pipe Line EFFECTIVE: February 1, 1992	4001 Penbrook, Odessa, TX. 79762

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	N	24	18S	37E	Yes	12-6-80

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

COMPLETION DATA

Designate Type of Completion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
8-10-80	12-6-80	4443'	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3667.0 GL	G/SA	4209'	
Perforations			Depth Casing Shoe
4209' - 4360' w/3500 gals 15% HCL acid			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
20"	16"	40'	40 sx Redi Mix
12 1/4"	8 5/8"	1600'	~~535sx Lite + 250sx C~~ 1150sx Lite + 200sx Cl C
7 7/8"	5 1/2"	4443'	

TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
12-16-80	2-5-81	Pump. 20 x 1-1/2"RWBS x 20 x 4	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	40.0		
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
352	4	348	15

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.

A. J. Fore
(Signature)
Supervisor, Regulatory & Permitting
(Title)
March 27, 1981
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19__
BY Leslie A. Clement
TITLE OIL & GAS INSPECTOR

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

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

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

Separate C-104 must be filed for each pool in multiply completed wells.