

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES REQUIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	

Operator
SHELL WESTERN E&P INC.

Address
P.O. BOX 991, HOUSTON, TEXAS 77001

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

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

DESCRIPTION OF WELL AND LEASE

Lease Name N. HOBBS (G/SA) UNIT SEC.32	Well No. 223	Pool Name, including Formation HOBBS (GRAYBURG/SAN ANDRES)	Kind of Lease XXXXXXXXXX	Lease No.
Location Unit Letter <u>F</u> : <u>2630</u> Feet From The <u>NORTH</u> Line and <u>1420</u> Feet From The <u>WEST</u> Line of Section <u>32</u> Township <u>18-S</u> Range <u>38-E</u> , NMPM, LEA County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent) SHELL PIPE LINE CORP. P.O. BOX 1910, MIDLAND, TEXAS 79701					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent) PHILLIPS PIPE LINE COMPANY GPM Gas Corporation 4001 PENDERBROOK, ODESSA, TEXAS 79762					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 32	Twp. 18-S	Range 38-E	Is gas actually connected? YES	When 5-03-85

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. ☐
Date Spudded 3-27-85	Date Compl. Ready to Prod. 5-03-85		Total Depth 4370'		P.B.T.D. -----			
Elevations (DF, RKB, RT, GR, etc.) 3631.3' GL	Name of Producing Formation SAN ANDRES		Top Oil/Gas Pay 3992'		Tubing Depth 4031'			
Perforations 4112' - 4251'					Depth Casing Shoe 4369'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8" (CONDUCTOR)	40'	
12-1/4"	9-5/8" (36#)	1500'	350 SX LITE+ 250SX HE II
8-3/4"	7" (20#)	4369'	650 SX LITE+ 325SX HE II

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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 5-03-85	Date of Test 5-17-85	Producing Method (Flow, pump, gas lift, etc.) PUMP - SUBMERSIBLE	
Length of Test 24 HRS	Tubing Pressure 30	Casing Pressure 30	Choke Size -----
Actual Prod. During Test	Oil-Bbls. 31	Water-Bbls. 591	Gas-MCF 1

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pump, 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)
A. J. FORE
SUPERVISOR REG. & PERMITTING
(Title)
JUNE 5, 1985
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 1 1985, 19____
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR
TITLE _____

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 owner well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filled for each pool in multiple completed wells.