

OIL CONSERVATION DIVISION

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

Form C-104
Revised 10-1-78

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| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATION | |
| PROMOTION OFFICE | |

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | |
|--|---|
| 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 <input checked="" type="checkbox"/> | Change in Transporter of: |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |

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

DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|-----------------|---|---|-----------|
| Lease Name N. HOBBS (G/SA) UNIT SEC.30 | Well No. 432 | Pool Name, including Formation HOBBS (GRAYBURG/SAN ANDRES) | Kind of Lease State, Federal XXXX | Lease No. |
| Location Unit Letter <u>I</u> : <u>2260</u> Feet From The <u>SOUTH</u> Line and <u>180</u> Feet From The <u>EAST</u> Line of Section <u>30</u> Township <u>18-S</u> Range <u>38-E</u> , NMPM. <u>LEA</u> County | | | | |

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|--|--|---------------|---------------|--------------|-----------------------------------|-----------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> SHELL PIPE LINE CORP. | Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1910, MIDLAND, TEXAS 79701 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS PIPE LINE COMPANY | Address (Give address to which approved copy of this form is to be sent) 4001 PENBROOK, ODESSA, TEXAS 79762 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit I | Section 30 | Range 18-S | Line 38-E | Is gas actually connected? YES | When 1-16-85 |

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 <input checked="" type="checkbox"/> | Gas Well | New Well <input checked="" type="checkbox"/> | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded 12-13-84 | Date Compl. Ready to Prod. 1-16-85 | Total Depth 4370' | P.B.T.D. ----- | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3649.5' GL | Name of Producing Formation SAN ANDRES | Top Oil/Gas Pay 4110' | Tubing Depth 4315' | | | | | |
| Perforations 4110' - 4266' | Depth Casing Shoe 4370' | | | | | | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|------------------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 17-1/2" | 13-3/8" (CONDUCTOR) | 55' | |
| 12-1/4" | 8-5/8" (24, 32#) | 1490' | 370 SX LITE + 250 SX C |
| 7-7/8" | 5-1/2" (14#) | 4370' | 350 SX LITE + 400 SX |
| | | | LITE + 300 SX HE2 |

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 1-16-85 | Date of Test 2-09-85 | Producing Method (Flow, pump, gas lift, etc.) PUMPING | |
| Length of Test 24 HRS | Tubing Pressure 35 | Casing Pressure 35 | Choke Size ----- |
| Actual Prod. During Test | Oil-Bbls. 249 | Water-Bbls. 267 | Gas-MCF 129 |

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 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)
MARCH 18, 1985
(Date)

OIL CONSERVATION DIVISION

MAR 28 1985

APPROVED _____, 19____
BY ORIGINAL SIGNATURE OF JERRY SEXTON
DEPUTY 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 deviate 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 filed for each pool in multiple completed wells.