

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	
AREA	
FILE	
FILE NO.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATION	
REGISTRATION OFFICE	

Operator  
SHELL WESTERN E&P INC.

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

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

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. 112	Pool Name, Including Formation HOBBS (GRAYBURG/SAN ANDRES)	Kind of Lease XXXXXXX Surface, Rodent or Fee	Lease No.
Location Unit Letter <u>D</u> : <u>200</u> Feet From The <u>NORTH</u> Line and <u>1310</u> Feet From The <u>WEST</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 GPM Gas Corporation	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 K	Effective Date 1985	Is gas actually connected? YES	When 3-24-85

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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 1-29-85	Date Compl. Ready to Prod. 3-24-85		Total Depth 4370'		P.B.T.D. -----			
Elevations (DF, RKB, RT, GR, etc.) 3657' GL	Name of Producing Formation SAN ANDRES		Top Oil/Gas Pay 4117'		Tubing Depth 4054'			
Perforations 4117' - 4254'					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#)	1520'	350 SX LITE +250SX HE II
8-3/4"	7" (20#)	4369'	675 SX LITE +315SX HE II

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)

Date First New Oil Run To Tanks 3-24-85	Date of Test 4-06-85	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. 246	Water-Bbls. 996	Gas-MCF 87

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)

MAY 3, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 9 1985, 19

BY Eddie W. Galt

TITLE Oil & Gas Production

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