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TRANSPORTER	OIL	
	GAS	
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NEW MEXICO CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Read & Stevens, Inc.	
Address P.O. Box 1518, Roswell, NM 88201	
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

I. DESCRIPTION OF WELL AND LEASE				
Lease Name Corbin State	Well No. 1	Pool Name, Including Formation S. Corbin Wolfcamp	Kind of Lease State, XXXXXX	Lease No. V-638
Location Unit Letter <u>N</u> ; <u>522</u> Feet From The <u>South</u> Line and <u>2160</u> Feet From The <u>West</u> Line Of Section <u>21</u> Township <u>18S</u> Range <u>33E</u> , NMPM, County <u>Lea</u>				

II. DESCRIPTION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
Conoco, Inc. <i>Surface Transport</i>		P.O. Box 1959, Midland, TX 79702		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
Phillips 66 Natural Gas Co.		Bartlesville, OK 74004		
If well produces oil or liquids, give location of tanks	Unit N	Sec. 21	Twp. 18S	Rge. 33E
				Is gas actually connected? Yes
				When 6-10-88
If this production is commingled with that from any other lease or pool, give commingling order number:				

III. COMPLETION DATA				
Designate Type of Completion-(X)	Oil Well X	Gas Well	New Well	Workover
			Deepen	Plug Back
			Same Res'v	Diff. Res'v
Date Spudded 10-29-87	Date Compl. Ready to Prod 5-19-88	Total Depth 12555'	P.B.T.D. 12,500'	
Elevations (DF, RKB, RT, GR, etc) 3810 GL	Name of Prod. Formation Wolfcamp	Top Oil/Gas Pay 10382	Tubing Depth 12,220'	
Perforations 11160-11210 11,390-11,400			Depth Casing Shoe	

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8	410'	400 sx
12 1/4	8 5/8	2985'	1350 sx
7 7/8	5 1/2	12540	1st stg 1190 sx
			2nd stg 2000 sx

IV. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load and must be equal to or exceed top allowable for this depth or be for full 24 hours)			
Date First New Oil Run To 5-13-88	Date of Test 5-17-88	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 950	Casing Pressure pkr	Choke Size 20/64
Actual Prod. During Test	Oil-Bbls. 557	Water-Bbls. 0	Gas-MCF 467

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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

John C. Maffey Jr.
(Signature)

Petroleum Engineer
(Title)

6-10-88
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 ____

BY _____

TITLE _____

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

If this is a request for allowable for a newly drilled 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 filed for each pool in multiply.