District I PO Box 1980, Hobbs, NM 88241-1980 District II

20 Drawer DD, Artesia, NM 88211-0719

District III

1000 Rio Brazos Rd., Aztec, NM \$7410 District IV

State of New Mexico
y, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

| PO Box 2088, 5 [. | | | | LLOWA | BLE A | ND AT | TTUOI | ጋ፤⁄ፖ ልጥ | יים ארט יים | X D A NO | AM ₹ | ENDED REPOR | | |
|--|---------------|------------------------|--------------------------------------|---------------------------------------|---------------------------------------|--|-----------------------------------|-------------|--|-----------------|-----------------------------|---------------------|--|--|
| REQUEST FOR ALLOWABLE A Operator name and Address SHACKELFORD OIL COMPANY | | | | | | | ND AUTHORIZATION TO | | | | ² OGRID Number | | | |
| P. O. BOX 10665 | | | | | | | | | | | 020595 | | | |
| MIDLAND, TX 79702 | | | | | | | CO 4/30 | | | | / 96 Reason for Filing Code | | | |
| 30 - 02 53049600 WEST LUSK DELAWA | | | | | | ' Pool Name | | | | 41540 Pool Code | | | | |
| 15960 Pr | operty Code | | AMOCO | Property Name | | | | _ | 1 'Well Number | | | | | |
| I. 10 (| Surface | | | | | | | | | | | | | |
| U or iot no. | Section 21 | Township 19S | Range 32E | Lot.Idn | Feet fro | m the | | outh Line | Feet from the | East/West line | | County | | |
| | Bottom] | | | | 660 | NOF | | ТН | 330 | WEST | | LEA | | |
| UL or lot no. | Section | Township | | Lot Ida | Feet fre | | T | | T | • | | | | |
| מ | 21 | 19S | 32E | 200.101 | l | m the | North/South line NORTH mit Number | | Feet from the | East/W | est line | County | | |
| 12 Lee Code | | ng Method C | | Connection D | 660 | C-129 Perm | | | 330 C-129 Effective | WEST | 11.0 | LEA | | |
| II Oil a | -d C 1 | | | | | | | | C-125 Exterité | Date | C. | 129 Expiration Date | | |
| II. Oil at | ter das | | rters '' Transporter | · Vaa | | | | | | | | | | |
| OGRID | | and Address | | | | ²⁴ POD ²¹ O/G | | | 22 POD ULSTR Location and Description | | | | | |
| 012426 | Kel | lly Maclaskey Oilfield | | | | 2640 | 810 | 0 | (-21-19-32) | | | | | |
| | P. | O. Box | 580, Hol | bbs,NM88 | 241 | | | | , 0 | , ,, | ےد | 7 | | |
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| kiri (zedania) | zidos | | | | | | | | | | | | | |
| | ced Wa | 4 | | | | | | | | | | | | |
| y. Flodid | OD Wa | ier | | | | 4 non re | | | | | | | | |
| | | | | | | ¹⁴ POD UL | STR Locat | ion and D | escription | | | | | |
| . Well C | Completi | on Data | | | | · | | | | /** | <u>-</u> | | | |
| 11 Spud Date | | | 14 Ready Da | | a de la | | | " PBTD | | | 19 Perforations | | | |
| | Hole Size | ! | 31 Casing & Tubing | | - | | | | | | | | | |
| | | | | asing & Tubir | ng Size | | 32 | Depth Set | | | 33 Sack | ı Cement | | |
| | | | | | · · · · · · · · · · · · · · · · · · · | _ | | | | | | | | |
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| | | | | | | | | | | | | | | |
| I. Well 7 | Test Dat | <u>а</u> | <u> </u> | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | |
| | | | clivery Date "Test Date | | | 77 Test Length | | | N Tbg. Pressure N Cag. Pressure | | | 7 C P | | |
| " Choke | Si- | 41 Oil | | 4 Water | | ⁴³ Gas | | | 10g. Pressure | | | Cag. Fremure | | |
| CHORE | SIZE | | | | | | | " AOF | | | 4 Test Method | | | |
| I hereby certify ith and that the | that the rule | of the Oil (| Conservation Distruction Distruction | vision have bee | n complied | | | | | | | | | |
| ow scale and de | elief. | | | tere to the best | of my | | | | NSERVATI | | | ON | | |
| ignature: Von A Machelford | | | | | | Approved by: ORIGINAL SIGNED BY JERRY SEXTON | | | | | | | | |
| rinted name: DON G. SHACKELLOND | | | | | | Title: DISTRICT I SUPERVISOR | | | | | | | | |
| owner Owner | | | | | | Approval Date: MAY 02 1996 | | | | | | | | |
| Phone: 915-682-9789 If this is a change of operator fill in the OGRID number and name of the prev | | | | | | | | | | | | | | |
| II United to a che | ruge of opera | tor fill in th | e OGRID num | ber and name | of the prev | ious operat | or | | | | | | | |
| | Previous Op | erator Signa | ture | | | Printed | Nama | | | | | | | |
| | | | | | | | ··· | | | Title | • | Date | | |

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