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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL 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

\*REVISED\*

I. Operator  
SHELL OIL COMPANY

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

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input checked="" type="checkbox"/>	Oil	<input checked="" type="checkbox"/>	CHANGE IN TRANSPORTER OF OIL
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	(SEE C-104 FILED DECEMBER 5, 1983)
		Dry Gas	<input type="checkbox"/>	
		Condensate	<input type="checkbox"/>	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
STATE T	9	VACUUM YATES	State, XXXXXXXXXX	

Location

Unit Letter I ; 2310 Feet From The SOUTH Line and 660 Feet From The EAST

Line of Section 33 Township 17-S Range 35-E, NMPM, LEA County

III. DESIGNATION 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)
* TEXAS-NEW MEXICO PIPE-LINE COMPANY	P. O. BOX 52332, HOUSTON, TEXAS 77052
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
PHILLIPS PIPE LINE COMPANY	4001 PENBROOK STREET, ODESSA, TEXAS 79762
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	J 33 17-S 35-E YES 11-16-83

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
X	X					X		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
11-06-63	11-16-63	6245'	3404'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3938' GL	YATES	3043'	3198'					
Perforations			Depth Casing Shoe					
3043' to 3111'			6245'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8-5/8" (24#)	1618'	575 SX
7-7/8"	5-1/2" (17#)	6245'	950 SX

V. 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
11-16-83	11-17-83	PUMPING	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
22 hrs	---	60	---
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	33	92	41

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

VI. 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.

  
(Signature) A. J. FORE  
SUPERVISOR REGULATORY & PERMITTING  
(Title)  
DECEMBER 21, 1983  
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 27 1983, 19  
BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I 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 deviator tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for all wells on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of condition.

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