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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND HOBBES OFFICE O.C.C.
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
MAY 31 2 07 PM '66

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

I.

Operator MINERALS, INC.	
Address P.O. BOX 2215, HOBBS, NEW MEXICO	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain)	
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE

Lease Name WILF STATE	Well No. 3	Pool Name, Including Formation PEARL-QUEEN	Kind of Lease State, Federal or Fee STATE	Lease No. E 3143
Location				
Unit Letter D	660	Feet From The NORTH	Line and 660	Feet From The WEST
Line of Section 36	Township 19 S	Range 34 E	LEA	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> SHELL OIL CO. & RIDGE PIPELINE CO.	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 2099, HOUSTON, TEXAS			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> WARREN PETROLEUM	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1589, TULSA, OKLAHOMA			
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 36	Twp. 19 S	Rge. 34 E
			Is gas actually connected? Yes	When May 16, 1966

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'tv.	Diff. Res'tv.
Date Spudded APRIL 8, 1966	Date Compl. Ready to Prod. MAY 15, 1966	Total Depth 5138		P.B.T.D. 5111					
Elevations (DF, RKB, RT, GR, etc.) 3725 KB	Name of Producing Formation QUEEN	Top Oil/Gas Pay 4625		Tubing Depth 5066					
Perforations One hole each @ 4763, 4765, 4885, 4889, 4943, 4951, 4953, 4992, 4994,		4996		Depth Casing Shoe 5137					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4		8 5/8		245		125			
7 7/8		4 1/2		5137		268			
		2		5066					

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 May 16, 1966	Date of Test May 27, 1966	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours.	Tubing Pressure Pump	Casing Pressure Pump	Choke Size 2 inch
Actual Prod. During Test	Oil - Bbls. 57	Water - Bbls. 6	Gas - MCF 52

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.
MINERALS, INC.

R. J. Montgomery
(Signature)

PRESIDENT

(Title)

MAY 31, 1966

(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 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 filed for each pool in multiply completed wells.

I HEREBY CERTIFY THAT THE FOLLOWING DEVIATION SURVEYS WERE REPORTED
AT THE DEPTHS AND RESULTS AS INDICATED:

DEPTH	DEVIATION
198	1/4°
255	1/4°
1234	3/4°
1943	1/2°
2403	3/4°
2744	1 3/4°
2950	2 3/4°
3195	3°
3624	3 1/4°
3950	2 1/2°
4099	2 1/4°
4258	1 3/4°
4418	1 1/2°
4592	1 1/2°
4779	1 1/2°
5021	1 1/4°
5146	1 1/2°

I HEREBY CERTIFY THAT THESE WERE TAKEN FROM THE SURVEY ACTUALLY
CONDUCTED.

R F Montgomery

STATE OF NEW MEXICO |

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COUNTY OF LEA |

On the 21 day of May 1966, before me personally appeared
R F Montgomery the signor of the above instrument,
who duly acknowledged to me that he executed the same.

My Comm. Expires
Sept 23, 1966

James H. Hopper
Notary Public in and for Lea County,
New Mexico.