

REQUEST FOR ALLOWABLE  
AND

## AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

Operator The Superior Oil Company	
Address P. O. Box 1900, Midland, Texas 79701	
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

## II. DESCRIPTION OF WELL AND LEASE

Lease Name Government "E"	Lease No. NM-086	Well No. 5	Pool Name, including Formation Lea (San Andres)	Kind of Lease State, Federal or Fee Federal
Location				
Unit Letter G	1650	Feet From The North	Line and 2310	Feet From The East
Line of Section 25	Township 19-S	Range 34-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)
Permian Corporation (Truck)	1509 West Wall, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit A
	Sec. 25
	Twp. 19-S
	Rge. 34-E
Is gas actually connected?	When
No	

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 <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'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded Aug. 10, 1975	Date Compl. Ready to Prod. Sept. 10, 1975	Total Depth 6200'		P.B.T.D. 6095'				
Elevations (DF, RKB, RT, GR, etc.) 3775 KB	Name of Producing Formation San Andres	Top Oil/Gas Pay 5866		Tubing Depth 5930				
Perforations				Depth Casing Shoe 6200				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		400		300			
7-7/8"	5-1/2"		6,200		700			
	2-7/8"		5,930					

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 10-15-75	Date of Test 10-16-75	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure 200	Casing Pressure 20	Choke Size --
Actual Prod. During Test 29 BO	Oil-Bbls. 29	Water-Bbls. 10	Gas-MCF 23

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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.

O. V. Sivage, O. V. Sivage  
(Signature)  
Production Engineer  
(Title)  
October 21, 1975  
(Date)

## OIL CONSERVATION COMMISSION

APPROVED 001, 19\_\_\_\_  
BY Larry Sexton  
TITLE SUPERVISOR

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.

THE SUPERIOR OIL COMPANY  
GOVERNMENT "E" NO. 5  
SECTION 25, T-19-S, R-34-E  
LEA (SAN ANDRES) FIELD  
LEA COUNTY, NEW MEXICO  
DEVIATION SURVEY TABULATION

<u>Depth</u> <u>(Feet)</u>	<u>Deviation</u> <u>(Degrees)</u>	<u>Depth</u> <u>(Feet)</u>	<u>Deviation</u> <u>(Degrees)</u>	<u>Depth</u> <u>(Feet)</u>	<u>Deviation</u> <u>(Degrees)</u>
150	1/4	2179	1-1/2	4320	3/4
400	1/2	2211	1	4672	3/4
680	3/4	2574	1-1/2	4875	3/4
870	1/2	2834	1	5016	3/4
1120	1-1/4	3178	2-3/4	5410	1
1250	3/4	3260	2-1/4	5504	1/2
1500	1	3354	1-3/4	5906	3/4
1530	3/4	3547	1	6200	1/4
1794	1/2	3929	3/4		

I certify that the above information is true and complete to the best of my knowledge.

*A. V. Savage*

SUBSCRIBED and sworn to before me this 21<sup>st</sup> day of October, 1975

*J. J. Font*  
Notary Public in and for Midland  
County, Texas

My Commission Expires June 1, 1977