

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

READ & STEVENS, INC.

P.O. BOX 1518, ROSWELL, NM 88201

Person(s) for filing (Check proper box)	Other (Please explain)
Well <input type="checkbox"/>	
Completion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	EFFECTIVE SEPTEMBER 1, 1980

Change of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name STATE "BG"	Well No. 3	Pool Name, including Formation QUAIL QUEEN	Kind of Lease State, XXXXXXXXXXXX	Lease No. OG-1847
Unit Letter B	660	Feet From The NORTH	Line and 1980	Feet From The EAST
Line of Section 14	Township 19S	Range 34E	NMPM, LEA	County

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> CONOCO, INC. TRANSPORTATION DEPT.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 460, HOBBS, NM 88240				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> WARREN PETROLEUM CORPORATION	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1589, TULSA, OK				
Well produces oil or liquids, or location of tanks.	Unit H	Sec. 14	Twp. 19S	Rge. 34E	Is gas actually connected? When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reservoir	DBL. Re
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Locations (DF, RRB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Locations			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top oil able for this depth or be for full 24 hours)

First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Depth of Test	Tubing Pressure	Casing Pressure	Choke Size
Oil Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

WELL

Oil Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, 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 Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

PRODUCTION CLERK

SEPTEMBER 8, 1980

OIL CONSERVATION DIVISION

APPROVED **SEP 11 1980**
BY John Canyon
TITLE George

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 deviated 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 own well name or number, or transporter or other such change of condition.