

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

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

READ & STEVENS, INC.

P.O. BOX 1518, ROSWELL, NM 88201

on(s) for filing (check proper box)	Other (Please explain)
Well ☐	
Completion ☐	
Change in Ownership ☐	
Change in Transporter of:	
Oil ☒	Dry Gas ☐
Casinghead Gas ☐	Condensate ☐

EFFECTIVE SEPTEMBER 1, 1980

Change of ownership give name
Address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
QUAIL STATE	3-Y	QUAIL QUEEN	State, XXXXXXXX	OG-2001

Location	Unit Letter	I	1841	Feet From The	SOUTH	Line and	759	Feet From The	EAST
Line of Section	11	Township	19S	Range	34E	NMPM	LEA	Cour	

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
CONOCO, INC. TRANSPORTATION DEPT.	P.O. BOX 460, HOBBS, NM 88240					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
WARREN PETROLEUM CORPORATION	P.O. BOX 1589, TULSA, OK					
Well produces oil or liquids, e location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	0	11	19S	34E		

Is production 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 Hestv.	Diff. Hestv.
Is Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Locations (DF, RKB, 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 (Test must be after recovery of total volume of lead oil and must be equal to or exceed top of allowable for this depth or be for full 24 hours)

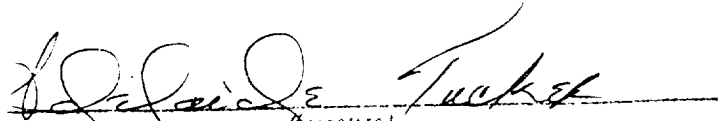
First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Total Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

SHUT-IN WELL

Oil Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	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 _____, 19____
BY John Ranyan
Geologist
TITLE _____

This form is to be filed in compliance with RULE 11.4.
If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 11.1.
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 ownership, name or number, or transporter or other such change of condition.
Form C-104 must be filed for each pool in each