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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
Effective 1-1-65

I.
Operator
Read & Stevens, Inc.

Address
P.O. Box 1518, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)
New Well [x] Recompletion [ ] Change in Ownership [ ]
Change in Transporter of: Oil [ ] Dry Gas [ ] Casinghead Gas [ ] Condensate [ ]
Other (Please explain)

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.
Wainoco State	2	Quail Queen	State, ~~XXXXXXXXXX~~	OG-4

Location
Unit Letter H ; 1980 Feet From The North Line and 660 Feet From The East
Line of Section 11 Township 19S Range 34E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [x] or Condensate [ ]
UPG, Inc. (EOTT) **EOTT Energy Operating LP Effective 4-1-94**
Address (Give address to which approved copy of this form is to be sent)
P.O. Box 66, Liberal, Kansas 67901

Name of Authorized Transporter of Casinghead Gas or Dry Gas
Warren Petroleum Corp.
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	Sec.	Twp.	Rge.	Is gas actually connected?	When
	H	11	19S	34E	yes	11/1/79

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					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
6/10/79	11/1/79	6200'	5819'
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3966.5' GR-3977' RKB	Queen	5036'	5742'

Perforations 5036-46'; 5066-73'; 5530-36'; 5558-88'; 5608-26'; 5654-62'; 5664-72'; 5704-42'
Depth Casing Shoe 5882'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8 5/8"	1849'	725 sx.
7 7/8"	4 1/2"	5882'	700 sx.
	2 3/8"	5742'	

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
7/9/79	11/1/79	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	–	–	–
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
83	41	12 load	30

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]
(Signature)
Production Clerk
(Title)
November 6, 1979
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 8 1979, 19
BY [signature]
TITLE SUPERVISOR DISTRICT I

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.