

OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DEPARTMENT OF REVENUE	
STATE OF NEW MEXICO	
LAND OFFICE	
FILE	
UNIT	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	
PERMIT	

Read & Stevens, Inc.

Address

P.O. Box 1518, Roswell, NM 88201

Reason(s) for filing (Check proper box)

New Well	☒	Change in Transporter of:	
Recompletion	☐	Oil	☐ Dry Gas ☐
Change in Ownership	☐	Coalinghead Gas	☐ Condensate ☐

Other (Please explain)

Gas Connection Date

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including formation	State	Lease No.
Wainoco	3	Quail Queen	XXXXXXXXXX	OG-488

Location

Unit Letter A : 990 Feet From The North Line and 990 Feet From The EastLine of Section 11 Township 19S Range 34E NE/4 Lea Count

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ **EOTT Energy Operating LP**
UPG, Inc. (EOTT) Effective 4-1-94Name of Authorized Transporter of Coalinghead Gas ☒ **Warren Petroleum Corp.**

Unit	Sec.	Twp.	Range
H	11	19S	34E

If well produces oil or fluids,
give location of tanks.

Address (Give address to which approved copy of this form is to be sent)

P.O. Box 66, Liberal, Kansas 67901

Address (Give address to which approved copy of this form is to be sent)

P.O. Box 1589, Tulsa, OK

Is this actually connected?

yes

When

9/15/80

If this 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	Reopen	Plug and Abandon	Other
Date Spudded	Date Compl. Ready to Prod.	Total Depth	Produced	Produced	Produced	Produced	Produced
Elevations (H, L, B, T, GR, etc.)	Name of Producing Formation	Top of Producing Layer	Testing Depth	Depth	Depth	Depth	Depth
Iterations							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS & CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

(Test must be after recovery of total volume of fluid oil and must be equal to or exceed the allowable for this depth or be for full 24 hours)

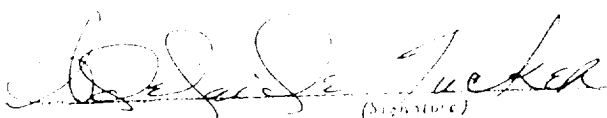
Date First New Oil Run To Tank	Date of Test	Producing Form (H, B, T, GR, etc.)	
Length of Test	Testing Pressure	Casing Pressure	Chore Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/Water	Gravity of Condensate
Testing Method (Front, Back, etc.)	Tubing Pressure (psig-in)	Casing Pressure (psig-in)	Chore 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 above is true and complete to the best of my knowledge and belief.



Production Clerk

December 16, 1980

(Date)

OIL CONSERVATION DIVISION

APPROVED

DEC 16 1980

Orig. Signed by
Jerry Sexton
Dist. L. Supr.

TITLE

This form is to be filed in compliance with N.M.C.A. 19-1-10.
If this form is used for a newly drilled or deep well, this form must be accompanied by a calculation of the fluid tests taken on the well in accordance with N.M.C.A. 19-1-10.

All sections of this form must be filled out completely, for a file copy and a complete file.

Fill out only Sections I, II, III, and VI for changes of well name or number, or location, or other such change of record. This form must be filed for each pool to be