

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

Form C-104  
Revised 10-1-78

DATE RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.D.	
LAND OFFICE	
TRANSPORTER	
OIL	
NATURAL GAS	
OPERATION	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1. <b>Owner</b> Walter W. Krug DBA Wallen Production Company		<b>CASEHEAD GAS MUST NOT BE RELEASED AFTER 7/22/81 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED. from USBB</b>	
<b>Address</b> Box 1960 Midland, Texas 79702			
<b>Reason(s) for filing (Check proper box)</b>		<b>Other (Please explain)</b>	
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 <u>19</u> Wallen Federal # <u>19-1</u>	Well No. <u>1</u>	Pool Name, Including Formation <u>River</u> South Tonto-Yates Seven	Kind of Lease State <u>Federal</u> or Fee	Lease No. NM 07700
<b>Location</b> Unit Letter <u>M</u> : <u>430</u> Feet From The <u>S</u> Line and <u>990</u> Feet From The <u>west</u> Line of Section <u>19</u> Township <u>19S</u> Range <u>33E</u> NMPM, <u>Lea</u> 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"/> Texas New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) Box 2528 Hobbs, New Mexico 88240	
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 <u>N</u> Sec. <u>30</u> Twp. <u>19S</u> Rge. <u>33E</u>	Is gas actually connected? <u>no</u> When <u>TSTM yet</u>

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

V. 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 Hestv. <input type="checkbox"/> Diff. Hestv. <input type="checkbox"/>		
Date Spudded <u>1/5/1981</u>	Date Compl. Ready to Prod. <u>4/5/1981</u>	Total Depth <u>3157 feet</u>	P.B.T.D. <u>3157 feet</u>
Elevations (DF, RNB, RT, GR, etc.) <u>GR 3598</u>	Name of Producing Formation <u>Yates</u>	Top Oil/Gas Pay <u>2978'</u>	Tubing Depth <u>2985'</u>
Perforations <u>3006'-3099</u>	<u>36 holes</u>	Depth Casing Shoe <u>3157'</u>	
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>15 1/2"</u>	<u>13 3/8"</u>	<u>237'</u>	<u>500 sxs</u>
<u>12 1/2"</u>	<u>10 3/4"</u>	<u>549'</u>	<u>mudded in pulled</u>
<u>10"</u>	<u>8 5/8"</u>	<u>902'</u>	<u>mudded in pulled</u>
<u>8" 6"</u>	<u>7 1/2"</u>	<u>2940'</u>	<u>1100 sxs</u>
		<u>3157'</u>	<u>60 sxs</u>

V. TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL

Date First New Oil Run To Tanks <u>5/22/1981</u>	Date of Test <u>5/22/1981</u>	Producing Method (Flow, pump, gas lift, etc.) <u>pumping</u>	
Length of Test <u>24 hours</u>	Tubing Pressure <u>40 PSI</u>	Casing Pressure <u>60 PSI</u>	Choke Size <u>*****</u>
Actual Prod. During Test <u>48 bbls</u>	Oil-Bbls. <u>46</u>	Water-Bbls. <u>2</u>	Gas-MCF <u>TSTM</u>

GAS WELL

Actual 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

VI. 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.

Walter W. Krug  
(Signature)

Engineer

(Title)

5/23/1981

(Date)

OIL CONSERVATION DIVISION

APPROVED

BY

TITLE

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.