

DISTRIBUTION	
SANTA FE	
FILE	
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 O-111
Supersedes O-104 and O-110
Effective 1-1-83

Operator DAVID FASKEN	
Address 608 First National Bank Building, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	
New Well ☒	Change in Transporter ☐
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐
Other (Please explain) Request 4000 bbls testing allowable for July 1981.	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Midway-Strawn R-6876 1-1-82

Lease Name Consolidated State	Well No. 2	Pool Name (including location) Midway (Strawn)	Kind of Lease State, Federal or Free State	Lease No.
Location Unit Letter A ; 990 Feet From The North Line and 990 Feet From The East				
Line of Section 8 Township 17-South Range 37-East, NMPM, Lea County				

III. DESIGNATION 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) P. O. Box 108, Shreveport, LA 71161					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent) No connection available					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 8	Twp. 17-S	Range 37-E	Is gas actually connected? No	When Phillips is testing gas volume & gas quality.

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 ☐	Some Res't.	Diff. Res't.
Date Spudded 4-30-81	Date Compl. Ready to Prod. 7-2-81		Total Depth 11,110'		F.B.T.D. 11,047'			
Elevations (DF, RKB, RT, GR, etc.) 3801.3' RKB	Name of Producing Formation Strawn		Top Oil/Gas Pay 10,721'		Testing Length 10,632'			
Perforations 10,725'-10,833'					Depth Casing Shoe 11,109'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		399'		250 Lite + 100 "C"			
12-1/4"	8-5/8"		4470'		2200 Lite + 250 "C"			
7-7/8"	5-1/2"		11109'		625 "H" + 800 "C"			
	2-3/8"		10632'					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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)

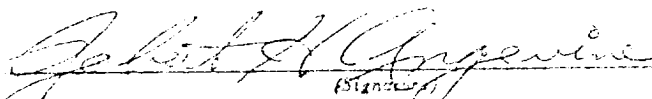
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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)

Robert H. Angevine, Agent

(Title)

7-8-81

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY _____
Jerry Seibert

TITLE _____
Deputy

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.

Complete Forms O-104 must be filed for each well in compliance