

OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

TO BE FILLED BY OPERATOR	
DISTRIBUTION	
SANTA FE	
FILE	
UNIT	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	
Operator	

Inexco Oil Company

Address

211 Highland Cross, Suite 201, Houston, Texas 77073

Reason(s) for filing (Check proper box)

Other (Please explain)

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

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Lottie York	Well No. 1	Pool Name, Including Formation Humble City	Kind of Lease State, Federal or Fee Fee
Location Unit Letter P ; 990 Feet From The South Line and 660 Feet From The East Line of Section 14 Township 17 South Range 37 East N.M.M. Lea			

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texas-New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, New Mexico 88240
Name of Authorized Transporter of Costinhead Gas ☒ or Dry Gas ☐ Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) 620 Frank Phillip Bldg, Bartlesville, OK 77004
If well produces oil or liquids, give location of tanks. Unit P Sec. 14 Twp. 17S Rge. 37E	Is gas actually connected? When Yes April 19, 1982

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Stim. Treat.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.		
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth		
Perforations				Length Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

IV. 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 at least 24 hours)

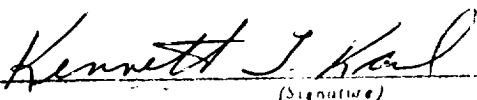
Test First New Oil Run To Tanks	Date of Test	Producing Process (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Casing Size
Actual Prod. During Test	Oil-BBLs	Water-BBLs	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	BBLs, Sec. 1430/MCF	Gravity of Condensate
Testing Method (prior, back prod.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Casing 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 Engineer

(Initials)

July 1, 1982

(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 12 1982, 19
 ORIGINAL SIGNED BY
 BY JERRY SEXTON
 TITLE DISTRICT SUPERVISOR

This form is to be filed in compliance with RULE 1103.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter or other such change of condition.

Separate Form C-104 must be filed for each pool in multi-completed wells.

RECEIVED

JUL 9 1982

U.S. DEPT. OF JUSTICE
HUBBS OFFICE