

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FILE	
U.S. OIL	
CARD OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATION	
PRODUCTION OFFICE	
Operator	

The Superior Oil Company

Approval to flare casinghead gas from
this well must be obtained from the
Minerals Management ServiceAddress
P.O. Box 3901, Midland, Texas 79702

Reason(s) for filing (Check proper box)

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

Other (Please explain)

Recompleted from Bone Spring to
San Andres.If change of ownership give name
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL

DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Government "23"	1	Wildcat - San Andres	State, Federal or Free Federal	NM-26395
Location				
Unit Letter	G	1980 Feet From The North Line and 1980 Feet From The east		
Line of Section	28 23	Township 19 S Range 34E	NMPM, Lea	County

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)
Southern Union Refining	P.O. Box 980, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Flared	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
G 26 19S 34E	No Vented

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 ☐ Deepen ☐ Plug Back ☒ Same Neat. ☐ Diff. Neat. ☐		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
11-11-81	8-1-84 PB	13,753 Orig.	6070
Elevations (SF, RAB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3805.2' GR	San Andres	6036	5646'
Perforations			Depth Casing Shoe
5860-5892, 5992-6036'	San Andres		13,753

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	40'	Redi-Mix
17-1/2"	13-3/8"	600'	675
12-1/4"	9-5/8"	4,965	2,875
7-7/8"	5-1/2"	13,753	1,430

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 oil
able 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.)	
8-2-84	8-16-84	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hrs.	50#	25#	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	98	19	41

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (puot, back pr.)	Tubing Pressure (Estat-in)	Casing Pressure (Estat-in)	Choke Size

1. 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.

OIL CONSERVATION DIVISION

AUG 30 1984

APPROVED _____, 19____

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 deep
well, this form must be accompanied by a tabulation of the Davis
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for el
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of ow
well name or number, or transporter, or other such change of condi
Separate Form O-104 must be filed for each pool in each
recompleted well.

G. E. Tate

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Division Operations Superintendent
(Title)August 21, 1984
(Date)