

JAN 1982	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Supersedes Old C-104 and C-  
Effective 1-1-65

Operator Mewbourne Oil Company	
Address P. O. Box 7698, Tyler, Texas 75711	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain) Approval to flare casinghead gas from this well must be obtained from the Minerals Management Service.	

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.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal "H"	Well No. 1	Pool Name, including Formation Querecho Plains-Queen Assoc.	Kind of Lease State, Federal or Fee Federal	Lease No. NM 8675
Location Unit Letter <u>P</u> ; <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>22</u> Township <u>18 South</u> Range <u>32 East</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"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 791, Midland, Texas 79702				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or <del>Effective: February 1, 1982</del> Phillips Petroleum Company GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 791, Midland, Texas 79702				
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 22	Twp. 18S	Rge. 32E	Is gas actually connected? When

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded 8/31/82	Date Compl. Ready to Prod. 9/25/82		Total Depth 4300'		P.B.T.D. 3991'			
Elevations (DF, RKB, RT, GR, etc.) 3767'DF, 3759'GR, 3769'KB	Name of Producing Formation Queen Associated		Top Oil/Gas Pay 3888'		Tubing Depth 3808'			
Perforations 3920-24', 3912-14', 3896-3902', 3888-92'					Depth Casing Shoe 4290'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12-1/4"	CASING & TUBING SIZE 8-5/8"		DEPTH SET 1196'		SACKS CEMENT 600			
7-7/8"	4-1/2"		4290'		900			
4-1/2"	2-3/8"		3808'					

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)

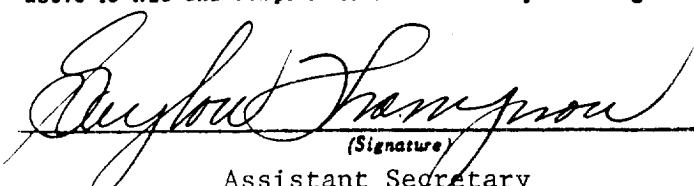
Date First New Oil Run To Tanks 9/25/82	Date of Test 9/27/82	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 60 psi	Casing Pressure --	Choke Size 40/64"
Actual Prod. During Test 271	Oil-Bbls. 271	Water-Bbls. 0	Gas-MCF 60

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)  
Assistant Secretary  
(Title)  
September 27, 1982  
(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 1 1982, 19\_\_\_\_  
BY \_\_\_\_\_ ORIGINAL SIGNED BY  
JERRY SEXTON  
TITLE \_\_\_\_\_ DISTRICT SUPER.

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.

RECEIVED

SEP 30 1982

C.C.O.  
HOBBS OFFICE