

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OPERATOR	
LAND OFFICE	
TRANSPORTER	
OPERATION OFFICE	

The Superior Oil Company

Address
P.O. Box 3901, Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well ☒
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous ownerApproval to flare casinghead gas from
this well must be obtained from the
Minerals Management Service.

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Government "9"	1	Scharb (Bone Spring)	State, Federal or Fee Federal	0554858
Location	Unit Letter	Feet From The	Line and	Feet From The
	G	1980	North	1980
			East	
Line of Section	Township	Range	NMPM	Lea
9	19S	35E		

II. 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)
The Permian Corporation	P.O. Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company (Pending)	4001 Penbrook, Odessa, Texas 79762
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit: G Sec: 9 Twp: 19S Rge: 35E	No WO Contract Approval

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res
(X)	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
2-21-83	3-31-83	10,000'	9,900'					
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3822.7 GR	Bone Spring	9493'	9439'					
Perforations			Depth Casing Shoe					
9493-9578								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	40'	Redi-Mix to Surface
17 1/2"	13 3/8"	410'	450 Class C
12 1/4"	9 5/8"	4,120'	1500 Lite, 300 Class
8 1/2"	7"	10,000'	802 Poz, 637 Class H

VI. 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 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.)
3-29-83	3-31-83	Flowing
Length of Test	Tubing Pressure	Casing Pressure
24	205	750
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.
	438	4
		315

GAS WELL

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

VII. 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.

G. E. Tate

Area Production Superintendent

(Title)

4-11-83

(Date)

OIL CONSERVATION DIVISION

APR 15 1983

APPROVED

BY ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT SUPERVISOR

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 devi
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for a
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of n
well name or number, or transporter, or other such change of condSeparate Form C-104 must be filed for each pool in the
production facilities.

RECEIVED
APR 14 1983
C.C.D.
HOLERS OFFICE