CIVED	
N	
	$\neg$
OIL	$\neg$
GAS	
	OIL

1	DISTRIBUTION  SANTA FE  FILE  U.S.G.S.  LAND OFFICE  TRANSPORTER  OIL  GAS  OPERATOR  PRORATION OFFICE	REQUEST	ONSERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C-116 Effective 1-1-65 GAS		
	Operator Donn zo i 1 Company					
Pennzoil Company Address						
	P. O. Drawer 1828, Midland, TX 79702-1828					
	Reason(s) for filing (Check proper box) New Well	Change in Transporter of:		AS MUST NOT WE		
	Recompletion	Oil Dry Gas	· INDEES IN	2/1/86 CEPTION TO R-4070		
	Change in Ownership	Casinghead Gas Conden	nsate	COME 2.10.11 20 20 20 20 10 10 10 10 10 10 10 10 10 10 10 10 10		
	If change of ownership give name and address of previous owner					
ш.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation Kind of Lea	se Lease No.		
	VIERSEN Location	2 Shipp Strawn	State, Feder	ral or Fee		
	0 1200 Coult 1650 F.					
				The <u>East</u>		
	Line of Section 4 Township 17-S Range 37-E , NMPM, Lea County					
III.	. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
	Name of Authorized Transporter of Oil		l .	oved copy of this form is to be sent)		
	Texas-New Mexico Pipel Name of Authorized Transporter of Cas	inghead Gas X or Dry Gas	P. O. Box 2528, Hobbs, Address (Give address to which appr	New Mexico 88240  oved copy of this form is to be sent)		
	Phillips Oil Company		4001 Penbrook, Odessa,	1		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.		hen C		
	If this production is commingled wit	1 1 4 17 37	No No	Soon		
IV.	COMPLETION DATA					
	Designate Type of Completio	on - (X)   Oil Well   Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	10-23-85 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	11,281 Top Oil/Gas Pay	11,232 ' Tubing Depth		
	3774 GR	Strawn	11,059'	10.946'		
	Perforations	h-1\		Depth Casing Shoe		
	11,059' to 11,123' (28 holes) 11,280'  TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	17-1/2"	13-3/8" 8-5/8"	406'	1.340		
	7-7/8" 5-1/2"	5-1/2"	11.280'	400		
		2-7/8"	10,946			
V.	7. 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 allow 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.)				lift, etc.)		
	12-1-85 Length of Test	12-1-85 Tubing Pressure	Flow Casing Pressure	Choke Size		
	24 hrs.	275	Packer	48/64"		
	Actual Prod. During Test 890	011-выв.	Water-Bbls. None	736		
	1_030	1 030	1 None	7.50		
	GAS WELL Actual Prod, Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual 7 tool 1001-Mo17B	20.9 0. 102.	Date Goldenstay Auror	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI.	CERTIFICATE OF COMPLIANCE		OU CONSERV	ATION COMMISSION		
V 2.	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED DEC 5 - 1985 , 19			
above is true and complete to the best of my knowledge and belief.		BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR				
	Roy R. Johnson (Signatural) Production Accountant		TITLE			
			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 allow-			
	December 3, 1985	le)	able on new and recompleted	wells.  II. III. and VI for changes of owner,		
	December 5, 1305			ster or other such change of condition		

(Date)

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

DEC 4- 1985