

REASON FOR FILING	
FILE	
U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL OAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASAlpha Twenty-One Production Company
Address

P.O. Box 1206, Jal, NM 88252

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)

Requesting approval to commingle
Tubb and Drinkard zones in this
well.If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Werta Federal Well No. 1 Pool Name (including formation) North House Tubb R-7193 (2-1-83)
House Drinkard Kind of Lease State, Federal or Fee Federal Lease No. NM 14812

Location

Unit Letter 0 : 2310 Feet From The East Line and 330 Feet From The South

Line of Section 35 Township 19 South Range 38 East NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Refining Company Address (Give address to which approved copy of this form is to be sent) P.O. Drawer 175, Artesia, NM 88210Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ El Paso Natural Gas Company Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, TX 79978

If well produces oil or liquids, give location of tanks. Unit 0 Sec. 35 Twp. 19-S Rge. 38-E Is gas actually connected? Yes When 6-11-82

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 Res'v. ☐ Diff. Res'v. ☒
Date Spudded 1-6-82 Date Compl. Ready to Prod. 3-8-82 Total Depth 7200' P.B.T.D. 6900' RBP
Elevations (DF, R&B, RT, GR, etc.) 3577' GL Name of Producing Formation Tubbs Top Oil/Gas Pay 6675' Tubing Depth 6675'
Perforations 6675, 6678, 6680, 6686, 6688, 6690, 6698, 6704, 6724, 6726, 6732, 6740, 6742, 6754, 6760, 6770, 6774, (17 Perfs) Depth Casing Shoe 7196'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	1,611.94'	800 sx Cl.C, Circ. 150 sx
7-7/8"	5-1/2"	7,195.77	1st Stg-575 sx Cl.C, Circ
			2nd Stg-1050 sx Hallib.
			Lite, 200 sx Cl.C., Circ.

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)

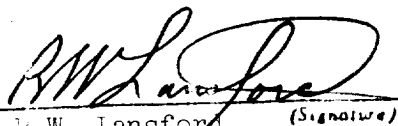
Date First New Oil Run To Tanks 7-3-82	Date of Test 7-20-82	Producing Method (Flow, pump, gas lift, etc.) Pumping-Anvil 228
Length of Test 24 hrs.	Tubing Pressure Pump	Casing Pressure 18 PSI
Actual Prod. During Test 20.28	Oil-Bbls. 8.28	Water-Bbls. 20
		Choke Size 32/64
		Gas-MCF 40

GAS WELL

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


R.W. Lansford (Signature)Vice President/Energy Resources
(Title)8-5-82
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 9 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 multiple completed wells.

RECEIVED

AUG 10 1982

O.C.D.
HCEBS OFFICE