ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

		I ¹ . O.	110 X 2088		
	IAMIA FE	SANTA FE, N	EW MEXICO 87501		
	V 4.U.4.				
	REQUEST FOR ALLOWABLE				
	TAARSONTER DAS	AND .			
1.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
	Shell Western E&P, Inc.				
	Address				
	200 North Dairy Ashford, P.O. Box 991, Houston, Texas 77001 Reason(s) for filing (Check proper box)				
	Now Well Change in Transparter of:				
	Recompletion		co.		
	Change in Ownership X Casinghead Gas Condensate				
	If change of ownership give name and address of previous owner	Shell Oil Company, P.(O. Box 991. Houston, Texa	s 77001	
11.	DESCRIPTION OF WELL AND LEASE				
	Charles Name Well No. Pool Name, Including Formation Kind of Lease No. Lease No. Charles				
	State J	2 Eunice Monum	ment (G-SA) State, Feder	ol or Foo State	
•	Unit Letter 0 : 60	00 Feet From The South L	Ine and 1980 Feet From	The Egst C	
	Line of Section 32 T	mahip 205' Range	37E NMPM. Lea	Consti	
M.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
4 14.	None of Authorized Transporter of Cil Condensate Address (Give address to which approved copy of this form is to be sent)				
	Shell Pupeline Corp		P.O. Box 1910 Midland TX 79702		
	Nexe of Authorized Transporter of Casinghead Gas X or Dry Gas		Address (Give address to which approved copy of this form is to be sent)		
	Phillips Pipeline Company		4001 Penbrook St, Odessa. Texas 79762		
	if well produces oil or liquids, cive location of tanks.	No Change	Yes	va VA	
··;	If this production is commingled with that from any other lease or pool, give commingling order numbers COMPLETION DATA				
	Designate Type of Completi	Oll Well . Gas Well	New Well Workover Deepen	Plug Back Same Res'r. Dill. Res	
	Date Spudded				
	•	Dece Campl. Ready to Prod.	Total Depth	P.B.T.D.	
	Lievations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Otl/Gas Pay .	Tubing Depth	
İ	Perforations			Depth Casing Shoe	
ł	Tuolue Come				
ŀ	HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD		
Ī		- GASING & LOSING SIZE	DEPTH SET	SACKS CEMENT	
[<u> </u>		
ļ					
_ L					
V. 7	FEST DATA AND REQUEST F OIL WELL	OR ALLOWABLE Test must be a	ofter recovery of total volume of load oil	and must be equal to or exceed top allo	
	Date First New Oil Run To Tanks Date of Test		pth or be for full 24 hours] Producing Method (Flow, pump, gas lift, etc.)		
L	·		transport to the pany, gas to		
	Length of Test	Tubing Pressure	Casing Pressure	Chake Size	
H	Actual Prod. During Test	Oil-Bble.	<u> </u>		
- [011-844	Water-Bbis.	Gas-MCF	
_	CAS WAS A		<u> </u>		
_	SAS WELL Actual Prod. Tool-MCF/D	Length of Test		· · ·	
			Bbie. Condensate/AMCF	Cravity of Condensate	
7	eeting Method (pitot, back pr.)	Tubing Pressure (Shint-in)	Cooling Pressure (Shot-in)	Choke Size	
ז. כ ∟	ERTIFICATE OF COMPLIANC				
- -			OIL CONSERVAT	ION DIVISION	
1	hereby certify that the rules and re	egulations of the Oil Conservation	OIL CONSERVATION DIVISION JAN 3 1 1984		
D	avision have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		CRISINAL SIGNED BY JERRY SEXTON		
_			DISTRICT I SUPERVISOR		
	1 Dawson		TITLE		
	(Signature) Attorney-in-Fact		This form is to be filed in c	This form is to be filed in compliance with null 1194.	
	Signatural		If this is a request for silovable for a newly drilled or dequence		
	Attorney-in-Fact		well, this form must be accompenied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.		
_	(Titl		All sections of this form must be filled out completely for allow		

Effective January 1, 1984 December 1, 1983

All sections of this form must be filled out completely for allow able 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.

AN 19 1984 HOSES CORICE