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LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
PRORATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
Supersedes Old O-104 and O-110
Effective 1-1-85

Crown Central Petroleum Corporation	
4000 N. Big Spring, Suite 213, Midland, Texas 79705	
Reason(s) for filing (check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of <input type="checkbox"/>
Drilling operation <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>
Change in ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
	Dry Gas <input type="checkbox"/>
	Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including Formation	Kind of Lease
Fred Turner	2	West Nadine (Blinebry)	State, Federal, or Free Fee
Section			
Quarter Section	0	660	Feet From The South Line and 1980 Feet From The East
Line of Section	6	Township	20S
Range	38E	County	Lea

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Shell Pipeline Corporation	P.O. Box 910, Midland, TX 79702					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Warren Petroleum Corp.	P.O. Box 67, Monument, New Mexico 88265					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	P	6	20S	38E	Yes	-

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
	X				X			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.					
4/15/86	5/23/86	6098	6085					
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
West Nadine	Blinebry	5880	5441					
Perforations			Depth Casing Shoe					
5880, 84, 88, 94, 5938, 64, 78, 80, 6036, 38, 51, 53, 69, 74			6098					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15	10-3/4		268		275			
8-3/4	7		4011		850			
6-1/4	4-1/2		6098		600			
	2-3/8		5741					

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)

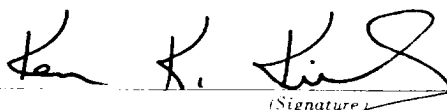
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
5/23/86	6/9/86	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	95	30	-
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MMCF
30	16	14	42

GAS WELL

Actual Prod. Test-MMCF	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure	Casing Pressure	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.


K.K. Kirby

Petroleum Engineer

(Title)

6/11/86

(Date)

OIL CONSERVATION COMMISSION

APPROVED  19

BY **Eddie W. Seay**

TITLE **Oil & Gas Inspector**

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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter or other such change of condition.