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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Shell Oil Company

Address
P. O. Box 576, Houston, Texas 77001

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☒ Casinghead Gas ☐ Condensate ☐

Change in Ownership ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|----------------------|---|--|-----------|
| Lease Name State J | Well No. 5 | Pool Name, Including Formation Eunice-Monument (G-SA) | Kind of Lease State, Federal or Fee State | Lease No. |
| Location Unit Letter J 1730 Feet From The South Line and 2055 Feet From The East | | | | |
| Line of Section 32 Township 20S Range 37E , NMPM, Lea County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|---|---|-------------------|--------------------|--------------------|--|-----------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipe Line | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas 79701 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum | Address (Give address to which approved copy of this form is to be sent) Room 717 Phillips Bldg., Odessa, Texas 79760 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit J | Sec. 32 | Twp. 20S | Rge. 37E | Is gas actually connected? Yes | When 3/1/74 |

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 <input checked="" type="checkbox"/> | Gas Well | New Well | Workover <input checked="" type="checkbox"/> | Deepen | Plug Back | Same Res'v. <input checked="" type="checkbox"/> | Diff. Res'v. |
| Date Spudded | Date Compl. Ready to Prod. 2-20-74 | Total Depth 6330 | P.B.T.D. 4200 | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3538 DF | Name of Producing Formation Grayburg | Top Oil/Gas Pay 3827 | Tubing Depth 4113 | | | | | |
| Perforations 3827-3832 | Depth Casing Shoe 6323 | | | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | | | |
| 9 5/8" | 7 5/8" | 231 | 180 | | | | | |
| 6 3/4" | 4 1/2" | 6323 | 600 | | | | | |

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 2-20-74 | Date of Test 3-2-74 | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 24 hrs. | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil-Bbls. 25 | Water-Bbls. 232 | Gas-MCF 26 |

GAS WELL

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

E. H. Young (Signature)
Sec. Supvr. Oil Accounting
March 5, 1974 (Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
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 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 multiply completed wells.