

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

QUANAH PETROLEUM, INC.

Address 14800 Quorum Drive, Suite 500, Dallas, Texas 75240

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☒ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 5/17/82
UNLESS AN EXCEPTION TO RULE
IS OBTAINED from U.S.G.A.

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name ELLIOTT FEDERAL "A"	Well No. 2	Pool Name, Including Formation WANTZ ABO	Kind of Lease State, Federal or Fee FEDERAL	Lease No. NM 055603
Location Unit Letter F ; 1650 Feet From The north Line and 2310 Feet From The west Line of Section 9 Township 21S Range 38E , NMPM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> JM PETROLEUM	Address (Give address to which approved copy of this form is to be sent) Plaza of the Americas 630 Texas Commerce Bank Tower Dallas,
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)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When H 8 21S 38E No will use for pmp unit

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Rest'v. <input type="checkbox"/> Diff. Rest'v. <input type="checkbox"/>		
Date Spudded 11-5-81	Date Compl. Ready to Prod. 3-17-82	Total Depth 7750'	P.B.T.D. 7548'
Elevations (DF, RAB, RT, GR; etc.) 3570' GR	Name of Producing Formation ABO	Top Oil/Gas Pay 7330'	Tubing Depth 7709' (pkr @ 7230)
Perforations 7543'-7331'	Depth Casing Shoe 7750'		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8-5/8"	1595'	550 Howco Lt, 200 C1 C
7-7/8"	4-1/2"	7750'	760 Howco Lt, 500 50/50 Poz C1 C

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 3-17-82	Date of Test 3-17-82	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure 60#	Casing Pressure -	Choke Size None
Actual Prod. During Test 416	Oil-Bbls. 374	Water-Bbls. 42	Gas-MCF 65

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.


(Signature)

ENGINEERING TECHNICIAN

3-30-82

(Date)

OIL CONSERVATION DIVISION

APPROVED APR 1 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 deviated 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 filled for each pool in multiple completed wells.