

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1. OPERATOR	
L & B Oil Company, Inc.	
Address	
2600 So. Gessner, Suite 220, Houston, Texas 77063	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Establish transporters of condensate and natural gas for new well
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
State	1	Grama Ridge Morrow, East (Gas)	State, Federal or Fee State	B-1040
Location				
Unit Letter	C	: 660 Feet From The North Line and 1980 Feet From The West		
Line of Section	11	T. wship 22S	Range 34E	NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Permian Corp.	P.O. Box 3119, Midland, TX 79701
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Llano, Inc.	P. O. Drawer 1320, Hobbs, NM 88240
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
C 11 22S 34E	No Approx. 2/21/83

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'v.	Diff. Res'v.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
8/20/82	11/28/82	13,451'	12,895'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3,554' GR	Morrow	12,799'	12,720' (2-3/8")					
Perforations	Depth Casing Shoe							
12,8150-22' and 12,799-806' w/4 spf	13,451'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	1,120'	700 sx Lite + 200 sx "C"
12-1/4"	10-3/4"	5,518'	1st stage 500 sx, 2nd stage 7000 sx
9-1/2"	7-5/8"	11,200'	1st stage 710 sx, 2nd stage 700 sx
6-3/4"	5-1/2"	13,450'	400 sx

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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL 4 point potential test will be filed when pipeline is complete (approx. 2/21/83)

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
984	1 hr.	Gas & cond. flared, no gauge	not measured
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size
back pressure	5500	0	12/64"

VI. 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.

Larry Ames

(Signature)

Sr. Engineer

(Title)

2/18/83

(Date)

OIL CONSERVATION DIVISION

MAR 17 1983

APPROVED _____, 19____

BY ORIGINAL SIGNED BY EDDIE SEAY

TITLE OIL & GAS INSPECTION

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 Form C-104 must be filed for each pool in multiple or tested wells.

RECEIVED

MAR 11 1983

O.C.D.
HOBBS OFFICE