STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-1-78

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER OIL	
TRANSPORTER GAS	
OPERATOR	
PRORATION OFFICE	

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
APR 08 1983
OIL CONSERVATION DIVISION
SANTA FE

Operator: DMR Petroleum

Address: P. O. Box 968, Monahans, Texas 79756

Reason(s) for filing (Check proper box)

- New Well [X]
- Recompletion [ ]
- Change in Ownership [ ]
- Change in Transporter of: Oil [ ] Dry Gas [ ] Casinghead Gas [ ] Condensate [ ]

Other (Please explain): Approval to flare casinghead gas from this well must be obtained from the Minerals Management Service.

If change of ownership give name and address of previous owner: _____

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Auvenshine	1	Littman (San Andres)	State, Federal or Fee Federal	NM17253

Location

Unit Letter F : 753 Feet From The East Line and 1980 Feet From The North

Line of Section 21 Township 21S Range 38E , NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Southern Union Refining	P. O. Box 980 Hobbs, New Mexico 88240
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
NA	NA

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	21	21S	38E	NA	NA

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	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.
12-16-82	3-24-83	4720'	4700'
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
3527' GR	San Andres	4346'	4258'
Perforations			**Depth Casing Shoe**
4346, 49, 52, 55½, 63 67, 4371'			4701'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	1772'	1000
7 7/8"	5 1/2"	4701'	1195
	2 3/8"	4258'	

TEST DATA AND REQUEST FOR ALLOWABLE

(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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
4-1-83	4-4-83	Pump	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24	30 psi	30 psi	NA
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**
30	20	10	2

GAS WELL

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

Jerry Woodward
(Signature)

Petroleum Engineer
(Title)

4-5-83
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 20 1983, 19____

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

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 multiple

NMOOC

INCLINATION REPORT

(One Copy Must Be Filed With Each Completion Report.)

1. FIELD NAME (as per RRC Records or Wildcat): Littman	2. LEASE NAME: Auvenshine
3. OPERATOR: D. M. R. PETROLEUM (WOOD, MCSHANE & THAMS)	7. RRC Lease Number. (Oil completions only)
4. ADDRESS: P. O. BOX 968, MONAHANS, TEXAS 79756	8. Well Number: 1
5. LOCATION (Section, Block, and Survey): SEC. 21, T-21-5, R 38 E	9. RRC Identification Number (Gas completions only)
	10. County: LEA

RECORD OF INCLINATION

*11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	*13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle X100)	15. Course Displacement (feet)	16. Accumulative Displacement (feet)
419	4.19	3/4	1.31	5.49	5.49
893	4.74	1/2	.87	4.12	9.61
1336	4.43	3/4	1.31	5.80	15.41
1800	4.64	1/2	.87	4.04	19.45
2295	4.95	1	1.75	8.66	28.11
2916	6.21	2 1/4	3.93	24.41	52.52
3009	.93	2	3.49	3.25	55.77
3164	1.55	2	3.49	5.41	61.18
3351	1.87	1 1/2	2.62	12.84	74.02
3784	4.33	1 1/4	2.16	9.35	83.37
4545	7.61	3/4	1.31	9.97	93.34
4720	1.75	1	1.75	3.06	96.40

. Accumulative total displacement of well bore at total depth of 4,720 feet = 96.40 feet.

A. T. Lewis
Signature of Authorized Representative

A. T. LEWIS VICE PRESIDENT OF OPERATIONS
Name of Person and Title (type or print)

VERNA DRILLING CORP. - ODESSA, TEXAS
Name of Company

Telephone: 915 (Area Code) 381-6910

Janet Moore
Janet Moore, Notary Public
State of Texas
Comm Exp: 10-18-84