

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator T. H. McElvain Oil & Gas Properties	Well API No. 30-025-29175
Address P.O. Box 2148, Santa Fe, New Mexico 87504-2148	
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator	

Other (Please explain) CASINGHEAD GAS MUST NOT BE RELEASED AFTER 4-1-92 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.

36.6 ac

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bootleg Ridge 19 St.	Well No. 1	Pool Name, Including Formation Wildcat - Delaware	Kind of Lease State, Federal or Fee	Lease No. V-1996
Location Unit Letter <u>D</u> : <u>990</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>West</u> Line Section <u>19</u> Township <u>22S</u> Range <u>33E</u> , 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"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159, Artesia, New Mexico 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Negotiating with Phillips Petroleum	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 D	Sec. 19
	Twp. 22S	Rge. 33E
	Is gas actually connected? No	When ?

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 <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input checked="" type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded Workover 8-30-91	Date Compl. Ready to Prod. 2-10-92		Total Depth 15390		P.B.T.D. 5080			
Elevations (DF, RKB, RT, GR, etc.) 3692.9 GL	Name of Producing Formation (Bell Canyon) Delaware		Top Oil/Gas Pay 4974		Tubing Depth 4695			
Perforations open hole 4889-5080					Depth Casing Shoe 4889 KB			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		688		360 Lite + 360 C1 C			
12 1/4"	10 3/4"		4889		2350 Thrifty + 670 C1 C			
	2 7/8"		4695					

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 Tank 2-11-92	Date of Test 2-20-92	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 22 hrs	Tubing Pressure	Casing Pressure 700 psi	Choke Size
Actual Prod. During Test	Oil - Bbls. 39 / 42	Water - Bbls. 121	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

VI. OPERATOR 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 George B. Broome
George B. Broome Geological Engineer
Printed Name
2-21-92
Date
392-1935
Telephone No.

OIL CONSERVATION DIVISION

MAR 09 '92

Date Approved

By JOSEPH SEXTON
SUPERVISOR

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.