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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico Energy, Minerals and Natural Resources Departmen.

## **OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

I.

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

<u>I.</u>		TO TRA	NSPORT O	L AND NA	TURAL G					
1 🛨							API No. 025 30806			
Address										
	ew Mexico	88240	-2528							
Reason(s) for Filing (Check proper box) New Well		Change is '	I'mmemorter of:		er (Please expl FFECTIVE 6	-		•		
New Well Change in Transporter of: EFFECTIVE 6-1-91  Recompletion Oil Dry Gas										
Change in Operator X	Casinghead	_	Condensate							
If change of operator give name and address of previous operator	aco Inc.	P. 0.	Box 730 I	Hobbs, Ne	w Mexico	88240-2	528			
II. DESCRIPTION OF WELL	AND LEA	<b>ISE</b>								
Lease Name	Well No.   Pool Name, Including For							Lease Lease No.		
L R KERSHAW		15	SKAGGS DRIN	KARD F			Federal or Fee 388170		70	
Unit Letter B : 330 Feet From The NORTH Line and 2305 Feet From The EAST Line										
Section 13 Township 20S Range 37E , NMPM, LEA County										
III. DESIGNATION OF TRA	NSPORTE	R OF OII	L AND NATU	RAL GAS						
Name of Authorized Transporter of Oil Shell Pipeline Corporation  Address (Give address to which approved copy of this form is to be sent) P. O. Box 2648 Houston, Texas 77252										
Name of Authorized Transporter of Casi	or Dry Gas									
Warren Petrole	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589 Tulsa, Oklahoma 74102									
If well produces oil or liquids, give location of tanks.	ell produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually cor									
If this production is commingled with the IV. COMPLETION DATA	t from any other	er lease or po	ool, give comming	ling order numl	ber:			- <u>i</u>		
Designate Type of Completion		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back Sa	ume Res'v	Diff Res'v	
Date Spudded		l. Ready to I	Provi	Total Depth	<u> </u>	<u> </u>		·	1	
Date Chings. Ready			100				P.B.T.D.	P.B.1.U.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	oducing Fon	nation	Top Oil/Gas Pay			Tubing Depth			
Perforations				Depth Casing Shoe						
	CEMENTING RECORD			<u> </u>						
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SAC	SACKS CEMENT		
						<del></del>				
II man nama a san manara										
V. TEST DATA AND REQUE OIL WELL (Test must be after				he squal to an	massed ton alle	ahla dan di :	and and an inches			
Date First New Oil Run To Tank	be equal to or exceed top allowable for this depth or be for full 24 hours.)  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	<del>-                                    </del>						<u> </u>			
Actual Prod. Test - MCF/D	Length of Te	est		Bbis. Condensate/MMCF			Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFIC	ATE OF	COMPI	IANCE				<del> </del>	-		
I hereby certify that the rules and regulations of the Oil Conservation				OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				JUN 0 3 1991						
2/2		<del></del>		Date	Approved					
L.M. Miller				Orig. Signed by						
Signature K. M. Miller Div. Opers. Engr.				By Paul Kautz Geologist						
Printed Name Title				Title						
May 7, 1991 915-688-4834										

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.

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MAY 2 3 1991