

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

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

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

ILLEGIBLE

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Shell Pipeline		Well API No. 10-035-21906
Address P.O. Box 1910, Midland, TX 79702		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Change Lease Name from Warren Unit		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name WARREN UNIT, DISTRICT II	Well No. 105	Pool Name, Including Formation WARREN BLINERY/THEB C&G	Kind of Lease State, Federal or Fee	Lease No. 10-035-21906
Location Unit Letter A : 360 Feet From The NORTH Line and 660 Feet From The EAST Line Section 24 Township 36 S Range 38 E, NMPM, LRA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate SHELL PIPELINE	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1910, MIDLAND, TX. 79702					
Name of Authorized Transporter of Casinghead Gas or Dry Gas TEXACO EXPL & PROD. INC.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 3000, TULSA, OKLA. 74102					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 33	Tw. 20S	Rge. 38E	Is gas actually connected? YES	When? 8-2-93

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 XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 4-8-93	Date Compl. Ready to Prod. 5-28-93	Total Depth 6850	P.B.T.D. 6815					
Elevations (DF, RKB, RT, GR, etc.) 15-2838-4	Name of Producing Formation BLINERY/THEB C&G	Top Oil/Gas Pay 6819	Tubing Depth 5825					
Performance 1300 - 6775 TUB 4 1/2 - 5156 BLINERY	Depth Casing Shoe 3780							
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 11 7/8	CASING & TUBING SIZE 3 1/2	DEPTH SET 1521	SACKS CEMENT 800 3X					
11 7/8	3 1/2	2850	1263 3X					
	3 1/2	5823						

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 6-2-93	Date of Test 6-14-93	Producing Method (Flow, pump, gas lift, etc.) PUMPING	
Length of Test 54	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 54	Oil - Bbls. 39	Water - Bbls. 118	Gas - MCF 120

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
Printed Name
Title
Date
Telephone No.

OIL CONSERVATION DIVISION

JUN 22 1993

Date Approved

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I 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.

RECEIVED

JUN 21 1993

AND HOBBS
OFFICE