

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

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

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Shell Western E&P Inc. P.O. Box 576 Houston, TX 77001		² OGRID Number 020676
		³ Reason for Filing Code CO
⁴ API Number 30-025-06353	⁵ Pool Name EUNICE BLINEBRY-TUBB-DRINKARD-NORTH	⁶ Pool Code 22900
⁷ Property Code 010115	⁸ Property Name NORTHEAST DRINKARD UNIT	⁹ Well Number 319

II. Surface Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
Q 1/4	2	21S	37E		1650'	SOUTH	990'	EAST	LEA

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
¹² Lse Code S	¹³ Producing Method Code P	¹⁴ Gas Connection Date 3/19/85	¹⁵ C-129 Permit Number N/A	¹⁶ C-129 Effective Date N/A	¹⁷ C-129 Expiration Date N/A				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID 007440*	¹⁹ Transporter Name and Address EOTT Energy Pipeline LP P. O. Box 4666 Houston, TX 77210-4666	²⁰ POD 2264710	²¹ O/G O	²² POD ULSTR Location and Description A, SEC. 02, T21S, R37E NEDU CENTRAL BATTERY
	*THIS OGRID NO. VALID FROM 11/1/93 TO 4/01/94. AFTER 4/1/94, USE OGRID NO. 037480.			

IV. Produced Water

²³ POD 2264750	²⁴ POD ULSTR Location and Description A, SEC. 02, T21S, R37E
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V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTB	²⁹ Perforations
³⁰ Hole Sie	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

⁴⁶ I hereby certify that the rules 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:
G. S. Nady

Title:
Manager Land/Asset Administration

Date: February 28, 1995 Phone: (713)-544-4219

OIL CONSERVATION DIVISION

Approved by:
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title:

Approval Date: MAR 17 1995

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator
EOTT Oil Pipeline Company

Previous Operator Signature

Printed Name

Title

Date

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator SHELL WESTERN E & P INC. (4431 WCK)		Well API No.
Address P.O. BOX 576, Houston, TX 77001-0576		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
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

II. DESCRIPTION OF WELL AND LEASE

Lease Name NORTHEAST DRINKARD UNIT	Well No. 319	Pool Name, Including Formation NORTH EDNICE-BLINEBRY-TUBB- DRINKARD OIL & GAS	Kind of Lease State, Federal Lease Lease	Lease No.
Location Unit Letter Q : 1650 Feet From The South Line and 990 Feet From The East Line Section 2 Township 21-S Range 37-E, 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"/>	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 <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 3000, TULSA, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit Q	Sec. 2	Twp. 21-S	Rge. 37-E	Is gas actually connected? yes	When? 3-19-85

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 X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v X
Date Spudded 5-22-53	Date Compl. Ready to Prod. 9-15-88		Total Depth 8300'		P.B.T.D. 7030'			
Elevations (DF, RKB, RT, GR, etc.) 3481' GR	Name of Producing Formation BLINEBRY-TUBB-DRINKARD		Top Oil/Gas Pay 5733'		Tubing Depth 8300'			
Perforations 5786' - 6888' BLINEBRY-TUBB-DRINKARD					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/4"	13-3/8"		309'		350 SXS			
11"	8-5/8"		3099'		1575 SXS			
7-7/8"	5-1/2"		0-6019'		600 SXS			
			7095-8300'		180 SXS			
			5571-7587'		825 SXS			

V. TEST DATA AND REQUEST FOR ALLOWABLE 4" LNR

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	Date of Test 10-15-88	Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24 hrs	Tubing Pressure 30	Casing Pressure -----	Choke Size -----
Actual Prod. During Test	Oil - Bbls. 32	Water - Bbls. 9	Gas - MCF 45

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 A. J. Fore SUPV. REG. & PERMITTING
Printed Name FEB 2 1989 Title
Date (713) 870-3793 Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 06 1989

By Paul Kautz
Orig. Signed by
Geologist

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

FEB 6 1983

OCD
HOBBS OFFICE