GTATE OF NEW MEXICO GY AND MITIERALS DEPARTMENT ENER

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## OIL CONSERVATION DIVISION P. O. BOX 2088

	V 8.U.S.	SANIA PE, NI				
	TRANSPORTER DIL	REQUEST F	OR ALLOWABLE			
1.	CPENATION OFFICE	AUTHORIZATION TO TRAN	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
	Shell Western E&	P. Inc.				
	Address					
	Keeson(s) for filing (Check proper bos	Ashford, P.O. Box 991, F	Other (Please explain)			
-	New Well	Change in Transparier of:  Oil Dry (				
	Change in Ownership X		ensote .	•		
	If change of ownership give name and address of previous owner	Shell Oil Company, P.O.	Box 991, Houston, Texas	77001		
!!.	DESCRIPTION OF WELL AND	I.EASE   Well No.   Pool Name, Including				
	State Sec. 2	3 Brunson Elle		al or Foo State		
	Unit Letter : (ala	D Feet From The South L		m. West		
	Line of Section 02 T.	emahip 215 ' Ronge	37E NMPM Lea	County		
1. 1	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G		·		
Ī	Name of Authorized Transporter of Cli	or Condensate	Addiess (Give address to which approved copy of this form is to be sent)			
-	Shell Pipeline Corpora		P.O. Box 1910, Midland Address (Give address to which appro	, Texas 79702 ·		
	Getty $\mathcal{O}_i / \sim$ Company		P.O. Box 1137, Eunice			
	if well produces off or liquids, give location of tanks.	No Change Rec.	1s gas octually connected? W	NA .		
1	this production is commingled wi	th that from any other lease or pool,				
Ϊ	COMPLETION DATA	OII Well Gas Well	New Well Workover Deepen	Plug Book   Same Rea'v. Dill. Rea'		
-	Designate Type of Completion	Date Compl. Rectly to Prod.	Tari Dank			
	·	- The company is a production of the company is a production o	Total Depth	P.B.T.D.		
	Lievations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Ges Pay .	Tubing Depth		
Ī	Perforations		Depth Casing Shoe			
TUBING, CASING, AN			ID CEMENTING RECORD			
+	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
Ĺ						
F			•			
. 1	EST DATA AND REQUEST FO	OR ALLOWABLE (Test must be o	fter recovery of socal valume of load ail	and must be equal to or exceed top allo		
	OIL WELL Date First New Oil Run To Tunks	Date of Test	pth or be for full 24 hours)   Producing Method (Flow, pump, gas li	ji, etc.)		
Ļ	Length of Test	Tubing Pressure	Casing Pressure	<u> </u>		
Ĺ		. early Leasure	Caring Pressure	Choke Size		
'	Artual Prod. During Test	Cti-Bhia.	Walet-Bbie.	Gas-MCF		
_	4 15 19-90-0			74.2		
	AS WELL Astual Frad. Test-MCF/D	Length of Test	Bble. Condensate AMCF	Gravity of Condensate		
-	eeling Melkod (pitot, back pr.)	Tubing Pressure (Shat-is)	Cooling Pressure (Shat-1m)	Choke Size		
 . c	ERTIFICATE OF COMPLIANC	F	O" CONCEDIAN	TON DURING		
	·	•	OIL CONSERVAT	1 1984		
D	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.		APPROVED			
45			DISTRICT I SUPERVISOR			
I. Naway		TITLE  This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despens well, this form must be accompanied by a jabulation of the deviation tests taken on the well in accordance with RULE 111.				
					Attorney-in-Fact	
	Attorney-in-Fact					
_	Attorney-in-Fact (Tail	.,	tests taken on the well in accor	at be fuled out completely for allow		
_	(Tal.	ctive January 1, 1984	All sections of this form mu able on new and recompleted we Fill out only Sections I. Il	at be fuled out completely for allow		

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ENERGY AND MILICRALS DEPARTMENT

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CPE MAT-ON			
PAORATION OFFICE			

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

	V S.U.S.  LAND OFFICE  TRANSPORTER  OAS  CETRATOR	,	OR ALLOWABLE			
1.	PAGNATION OFFICE	NATION OFFICE				<del></del>
	Shell Western E&F	, Inc.				
	200 North Dairy /	Ashford, P.O. Box 991, Ho	ouston, Texas 770			<del></del>
	Now Well	Change in Transporter of:			<u>.</u>	<del>-</del>
	Recompletion  Change in Ownership X	OII Dry C	=		•	
	Cuanda IN Countainth V	Casinghead Gas Conde	elbeni	•		
	If change of ownership give name and address of previous owner	Shell Oil Company, P.O.	Box 991, Houstor	, Texas	77001	
I.	DESCRIPTION OF WELL AND		•			
	State Sec. 2	Well No. Pool Name, Including E	ormation .	Kind of Lease State, Federa	<b></b>	Leces Na.
	Location		<del></del> l	3.5.0, 7.50210	. drive State	ļ
•	Unit Letter U : 66	A Feet From The South Lie	ne and <u>lo(e 0</u>	_Feet From "	m. West	
	Line of Section 02 T.	mahtp 215 Range	37E , NMPM,	Lea		County
1.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA		······································		
	Shell Pipeline Co	* ,	P.O. Box 1910, Midland, TX 79702			
	Name of Authorized Transporter of Cas	singhead Gas v or Dry Gas	P.O. Box 1137, Eunice, New Mexico 88231			
	Getty Or/ Company					31
	if well produces oil or liquids, give location of tanks.	No Change	Yes	d? Who	NA NA	
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,			<u> </u>	
	Designate Type of Completion	on - (X)	New Weil Workover	Deepen I	Plug Back Same Res'	v. Diff. Res*
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.a.T.D.	
Ì	Eievations (DF, RKB, RT, GR, esc.)	Name of Producting Formation	Top Oil/Gas Pay	•	Tubing Depth	
Perforations		•	•	Depth Casing Shoe	<del></del>	
ı		TUBING, CASING, AND	CEMENTING RECORD	)		· · · ·
-	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE	T	SACKS CEM	ENT
i						<del></del>
į						
ĺ			<u>i</u>		i	
	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be as able for this de	fter recovery of total volum pth or be for full 24 hours)	e of load oil s	ind must be equal to or ex	ceed top allo
Ī	Date First New Oil Run To Tanks	Date of Test	Preducing Method (Flow,	pump, gas lif	i, etc.)	
-	Length of Test	Tubing Pressure	Casing Pressuré	•	Choke Size	
	Actual Prod. During Test	Oil-Bhis.	Water-Bala,		Gas-MCF	
٠		<u> </u>			74 -	
Т	GAS WELL Actual Prod. Teet-MCF/D	Length of Toel	Bble, Condensate/AMCF	<del></del>	Cravity of Condensate	
	Teeting Method (pical, back pr.)	Tubing Pressure (Shat-in)	Cosing Pressure (Sbut-	Lm)	Choke Size	
. (	CERTIFICATE OF COMPLIANC	E .	OIL CO	nserya I	10198141SION	•
	hereby certify that the rules and re		APPROVED		, 1	9
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY ORIGINAL SICHED BY JERRY SEXTON				
- · · · · · · · · · · · · · · · · · · ·			TITLE DI	STRICT I SU	PERVISOR	
	N. N	20		e filed in c	ompliance with RULE	1104.
_			If this is a reque	at for allow	able for a newly drilled	d or deepene
(Signature)			well, this form must be eccompenied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.			

<u> Attorney-in-Fact</u>

(Title) Effective January 1, 1983 December 1

(Dute)

All sections of this form must be filled out completely for allow able on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owner wall name or number, or transporter, or other such change of condition

Seperate Forms C-104 must be filed for each pool in multiple completed wells.

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