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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-101 and C-102
Effective 1-1-65

Operator Shell Oil Company	
Address P.O. Box 1509, Midland, TX 79702	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐	Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐	Open & test Tubb.

If change of ownership give name and address of previous owner _____

Lease Name Taylor-Glenn	Well No. 2	Pool Name, including Formation Tubb Gas	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter <u>I</u> ; <u>4620</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>3</u> Township <u>21S</u> Range <u>37E</u> , NMPM, <u>Lea</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Shell Pipe Line	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1165, Eunice, NM 88240
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Getty Oil Company	Address (Give address to which approved copy of this form is to be sent) Box 3000, Oil Center Bldg., Tulsa, OK 74102
If well produces oil or liquids, give location of tanks. Unit <u>I</u> Sec. <u>3</u> Twp. <u>21</u> Rge. <u>37</u>	Is gas actually connected? <u>yes</u> When <u>1954</u>

If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well ☒ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☒		
Date Spudded 1-4-50	Date Compl. Ready to Prod. 7-13-78 (Tubb)	Total Depth 6780	P.B.T.D. -
Elevations (DF, RKB, RT, CR, etc.) 3491' DF	Name of Producing Formation Tubb Gas	Top Oil/Gas Pay 6500	Tubing Depth 6169'
Perforations 6500' (2-1/2" holes)		Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/4"	13 3/8"	222'	300
11"	8 5/8"	2920'	2200
7 7/8"	5 1/2"	6665'	600

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 Tanks 7-18-78	Date of Test 7-20-78	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 40	Casing Pressure -	Choke Size
Actual Prod. During Test	Oil - Bbls. 9	Water - Bbls. 3	Gas - MCF 150

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

CERTIFICATE OF COMPLIANCE	OIL CONSERVATION COMMISSION
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	APPROVED <u>AUG 14 1978</u> , 19
<u>J. E. Sullivan</u> (Signature) Senior Engineering Technician 8-10-78 (Date)	BY <u>Orig. Signed by John Runyan</u> Geologist TITLE _____ This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the available tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of conditions.

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AUG 14 1978

OIL CONSERVATION COMM.
ROBBS, N. M.