STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTE	OM		
SAMTA FE			
FILE			
U.A.G.4.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

Separate Forms C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NORTHEAST ORINKARD UNIT 203 RRINKARD OF SLANERY-IUBB State, Federat or Fee Fee Lorenton Unit Letter P 3200 Feet From The SOUTH Line and 660 Feet From The East Line of Section 4 Township 21S Range 37E NMPM, LEA County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Coll or Condensate XX Shell Pipeline Corporation Name of Authorized Transporter of Coatingheed Gas or Dry Gas XX Texaco Producing Inc. If well produces oil or Italy day, Unit See. Twp. Rgs. Is gas actually connected? P.O. Box 3000, Tulsa, OK 74102 If this production is commingled with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPILANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been compliced with and that the information given is true and complete to the best of my knowledge and belief. SUPERVISOR REULATORY & PERMITTING Cities A. J. FORE SUPERVISOR Requestor allowable for a newly drilled or daspensively will. this form must be accompanied by a tabulation of the deviation of the well to accordance with Mule 111. All sections of this form must be successary wills. DEC 1 1987 Feet From The East County Feet From The East County Address (Gwe address to which approved copy of this form is to be sent) P.O. Box 1910, Midland, TX 79702 None of Authorized Transporter drop of this form is to be sent) P.O. Box 3000, Tulsa, OK 74102 This form is to be filed in compliance with Mule 1104. This form is to be filed in compliance with Mule 1104. This form is to be filed in compliance with Mule 1104. All sections of this form must be filled out completely for allowable for a newly drilled or daspensive to the well to accordance with Mule 111. All sections of this form must be filled out completely for allowable for a newly drilled or daspensive to the well to accordance with Mule 111. Fill out only Sections I, II, III, and VI for changes of owner fill	I. AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAS		
According to filling (Cheek proper box) New West Change in Transporter of:				
P. O. BOX 576, HOUSTON, TX 77001 (MCK 4435) Restorit) for tiling (Check proper box) Change in Transporter of: Dry Gas Change in Transporter of: Dry Gas Change in Ornawaship Unitization R-8540 Unitization R				
New Well Recompletion				
Recompletion Gil Ory Gas Condensate Blinebry and Drinkard pools. If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Vell No. Pool Nome, Including Formation NORTHEAST DRINKARD UNIT 203 DRINKARD OF STATE State, Federal of Fee Fee Lease No. NORTHEAST DRINKARD UNIT 203 DRINKARD OF STATE State, Federal of Fee Fee Lease No. Unit Letter P				
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NORTHEAST DRINKARD UNIT 203 DRINKARD OF BLINEBRY-TUBB- Unit Letter P : 3200 Feet From The SOUTH Line and 660 Feet From The East Line of Section 4 Township 21S Range 37E NMPM, LEA County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of OIL or Candenacta XX Shell Pipeline Corporation Name of Authorized Transporter of Casingness Gas or Dry Gas XX Texaco Producing Inc. If well produces oil or liquids. Unit Sec. Twp. Rgs. If you have so li or liquids. In this production is commingled with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverts side if necessary. VI. CERTIFICATE OF COMPLIANCE This form is to be filled in compliance with Ault 1104. BY SUPERVISOR REGULATORY & PERMITTING (Title) DEC 1 1987 Title form must be secompanied by a tabulation of the deviation of the well in accordance with Ault 111. All soctions of this form must be filled out completely for allowable on new and recompleted wells. All soctions of this form must be filled out completely for allowable on new and recompleted wells. All soctions of this form must be filled out completely for allowable on new and recompleted wells. All soctions of this form must be filled out completely for allowable on new and recompleted wells. All soctions of this form must be filled out completely for allowable on new and recompleted wells.				
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III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil	17	ne and 660 Feet From The East		
Name of Authorized Transporter of Oil	Line of Section 4 Township 21S Range	37E , NMPM, LEA County		
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Fill out only Sections 1, II, and VI for changes of owner		All sections of this form must be filled out completely for allow		
	DEC 1 1987 (Pare)	Fill out only Sections I. II. III. and VI for changes of owner well name or number, or transporter or other such change of condition		

IV. COMPLETION DATA									
Designate Type of Complet	ion - (X)	Gas Well	New Well	Motrover	Deepen	Plug Back	Same Restv.	Diff. Restv.	
Date Spuzdes	Date Compl. Ready to Pr	od.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	.; Name of Producing Formation		Top Oil/Gas Pay		Tubing Cepth				
Perforations						Depth Casing Shoe			
	TUBING, C	ASING, AN	O CEMENTI	NG RECORD	······································				
HOLE SIZE	CASING & TUBIA	IG SIZE		DEPTH SET		S.	SACKS CEMENT		
V. TEST DATA AND REQUEST	FOR ALLOWABLE (7	est must be d ble for this d	after recovery epth or be for	of total volum full 24 hows)	e of load of	land must be s	qual to or exc	ned to: Allow	
Date First Now Cil Run To Tanza	Date of Toet		Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure		Casing Pre	*****		Chore Size			
Adiuai Prod. During Test	Oil-Shis.		Water - Bbis			Gat-MCF		· · · · · · · · ·	
C I C IVITY I	<u>. L </u>							***	
GAS WELL Actual Prod. Tool-MCF/D	Length of Text		Bbis. Cond	ensate/MMCF		Gravity of (Condensate		
Testing Muthod (pitot, back pr.)	Tubing Prosaure (Shat-	ia }	Casing Pre	eswe (Sbat-	ia)	Choze Size			

NEW MEXICO OIL CONSERVATION COMMISSION WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C+102 Supersedes C+128 Effective 1-1-65

All distances must be from the outer boundaries of the Section. Operator Well No. SHELL WESTERN E&P INC NORTHEAST DRINKARD UNIT 203 Unit Letter Section Townsnip 215 37E LEA Actual Fostage Location of Weil: 3200 feet from the South line == 660 East Ground Lavet Elev. Foot NORTH EUNICE BLINEBRY-TUBB-Producing Formation Dedicated Acreage: 3465 DRINKARD CIL & GAS 40 Actes 1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below. 2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and rovalty). 3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc? X Yes If answer is "yes." type of consolidation _ No UNITIZATION If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.). No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commis-407 1 CERTIFICATION 1 1 17 P I hereby certify that the information caretained herein is true and complete to the best of my knowledge and belief. SUPV. REG. & PERMITTING SHELL WESTERN E&P INC. 1 1987 I hereby certify that the well location shown on this plat was plotted from field under my supervision, and that the same is true and correct to the best of my knowledge and belief. Date Surveyed Registered Professional Engineer ma/or Land Surveyor Certificate No. 16 50 1980 2310