STATE OF NEW MEXICO
GY AND MINERALS DEPARTMENT

Form C-104
Revised 10-1-78

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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator

Address: Shell Oil Company
P. O. Box 991, Houston, TX 77001

Reason(s) for filing (Check proper box)

New Well [ ]
Recompletion [ ]
Change in Ownership [X]

Change in Transporter of:
Oil [ ] Dry Gas [ ]
Casinghead Gas [ ] Condensate [ ]

Other (Please explain)
~~Temporarily assigned to commingle batteries. Timbry Drinkard, Hare Simpson and Hawk Abo.~~

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Argo A	6	Hare Simpson (at Gas)	State, Federal or Fee Fee	

Location
Unit Letter C : 440 Feet From The North Line and 2200 Feet From The West
Line of Section 22 Township 21 Range 37E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Shell Pip Line Corporation	P. O. Box 1910, Midland, TX 79701
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
Getty Oil Company	P. O. Box 328, Jal, NM

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	C	22	21	37E	Yes	11-05-79

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Res.
	X			X				

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	11-05-79	7909	

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
DF-3422	Hare Simpson		7419

Perforations	Depth Casing Shoe
OH 7411-7909 (See Correction)	

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	~~13-3/8"~~	~~227'~~	~~300~~
	~~8-5/8"~~	~~2883'~~	~~2000~~
	~~5-1/2"~~	~~7709'~~	~~500~~
	~~2-3/8"~~	~~7419'~~	~~0~~

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

Date First New Oil To Tanks	Date of Test	Producing Method (Flow, Pump, Gas lift, etc.)
11-05-79	01-17-80	Pump

Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	40	40	0

Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	30	0	109

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate

Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. 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.

A. Ramirez

A. Ramirez
Supervisor Oil Accounting
(Signature)

01-31-80
(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 6 1980, 19

BY Orig. Signed by Les Clements
Oil & Gas Insp.

TITLE

This form is to be filed in compliance with RULE ...

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation 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 operator, well name or number, or transporter, or other such change of condition.

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

RECEIVED
FEB 5 1980
O.C.D. HOBBS, OFFICE