	NO. OF COPIES RECEIVED						
1.	Operator SHELL OIL COMPANY						
	Address P. O. BOX 991, HOUSTON, TEXAS 77001						
	Reason(s) for filing (Check proper box) New Well Change in Transporter of:						
	Recompletion XX Oil Dry Gas						
	Change in Ownership	Casinghead Gas	Conder	isate			
	and address of previous owner			······			
Π.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No.						
	ARGO "A" 8 HARE SIMPSON				XXXX XXXXXX XXFee		
	Unit Letter D; 99	0 Feet From The	NORTH Lin	• and <u>990</u>	Feet From 7	WEST	
	Line of Section 22 To	wnship 21-S	Range	37-E , NK	ирм, LEA	·	County
III.	DESIGNATION OF TRANSPOR						······································
	Norme of Authorized Transporter of Oil XX or Condensate		Address (Give address to which approv P. O. BOX 1910, MIDLAN		ND, TEXAS 79701		
	Name of Authorized Transporter of Ca GETTY OIL COMPANY	singhead Gas 🗶 or D	ry Gas 🚞	1		ed copy of this form is to , NEW MEXICO 8	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Tw	P. P.ge.	Is gas actually conn		n	
	If this production is commingled wi	ii Ith that from any other i	lease or pool,	give commingling o	rder number:	DECEMBER 7, 1	303
	COMPLETION DATA	Oil Weli	Gas Well	New Well Workov		Plug Back Same Res	v. Diff. Ret. v.
• :	Designate Type of Completi	$\frac{\text{on} - (\lambda)}{ \text{Date Compl. Ready to } }$	Prod.	Total Depth	(;	Р.В.Т.Р.	<u>; X</u>
	3-09-51	12-06-83		8188'	•	7955	
	Slevations (DF, RKB, RT, GR, etc.) Name of Producing Formation 3438' DF HARE-SIMPSON			Top Oll/Gas Pay 7537		Tubing Depth 7537	
	Perforations 7537' to 7914'					Depth Casing Shoe 8011'	
	TUBING, CASING, AND CEMENTING RECORD						
	носе size			DEPTH SET		SACKS CEM	ENT
	11/4		28.55#)		28'	1700	
	7-7/8"	5-1/2" (15.5	<u>#, 17#)</u>	80	<u></u>	500	
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)						
	Date First New Oil Run To Tanks Date of Test		Producing Method (1	low, pump, eas lij	(t, etc.)	•••••••••••••••••••••••••••••••••••••••	
	12-08-83 Length of Test	12-08-83 Tubing Proseure		PUMPING		Choke Size	
	24 HRS.			35		Gas-MCF	
	Actual Prod. During Test	Prod. During Test Oil-Bbls. 48		Water-Bbls.		142	
	GAS WELL						
	Actual Prod. Test-MCF/D	Longth of Test		Bbls. Condensate/MMCF		Gravity of Condennate	
	Teating Mothed (pitot, back pr.)	Tubing Pressure (Chut	-12)	Casing Pressure (5	hut-in)	Choke Size	
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION		TION COMMISSICI	N	
	I hereby certify that the rules and	APPROVED DEC 27 1983					
	Commission have been complied above is true and complete to th	BYORIGINAL SIGNED BY JEVEY SEXTON TITLEDISTRICT I SUPERVISOR This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or desp well, this form must be accompanied by a tabulation of the davi tests taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for all					
(SUPERVISOR REGULAT				ed or daaps f tha duvi i		
	(Title) DECEMBER 20, 1983 (Vate)			well nume or number, or transporter, or other such changes of each			

1..

DEC 2: 1983 NOBES OFFICE

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