

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-70

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U.S.G.B.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATION	
PERMITS OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator SHELL WESTERN E&P INC.	
Address P. O. BOX 991, HOUSTON, TEXAS 77001	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name ARGO "A"	Well No. 11	Pool Name, including Formation HARE SIMPSON	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Unit Letter F ; 1650 Feet From The NORTH Line and 1650 Feet From The WEST				
Line of Section 22 Township 21-S Range 37-E, NMPM, LEA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1910, MIDLAND, TEXAS 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1137, EUNICE, NM 88231					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 22	Twp. 21-S	Rge. 37-E	Is gas actually connected? YES	When 1-04-85

If this production is commingled with that from any other lease or pool, give commingling order number: DHC-551

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil well <input checked="" type="checkbox"/>	Gas well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input checked="" type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input checked="" type="checkbox"/>
Date Spudded 11-16-51	Date Compl. Ready to Prod. 1-04-85	Total Depth 8005'		P.B.T.D. 7800'					
Elevations (DF, RKB, RT, CR, etc.) 3431' DF	Name of Producing Formation HARE SIMPSON	Top Oil/Gas Pay 7405'		Tubing Depth 7383'					
Perforations 7405 - 7510		Depth Casing Shoe -----							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/4"	13-3/8" (48#)	225'	250 SX
11"	8-5/8" (32#)	2903'	1900 SX
7-7/8"	5-1/2" (17, 15.5#)	2717' - 7343'	800 SX

V. 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)

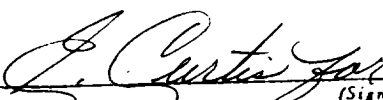
Date First New Oil Run To Tanks 1-04-85	Date of Test 3-05-85	Producing Method (Flow, pump, gas lift, etc.) PUMP	
Length of Test 24 HRS	Tubing Pressure 40	Casing Pressure 40	Choke Size -----
Actual Prod. During Test	Oil-Bbls. 2	Water-Bbls. 4	Gas-MCF 130

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

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.


(Signature)
A. J. FORE
SUPERVISOR REG. & PERMITTING
(Title)
APRIL 22, 1985
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19____

BY _____

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviate 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 condition.

Separate Form C-104 must be filed for each pool in multiple completed wells.

2025-1985
APR 24 1985
HOBBS OFFICE