

## L CONSERVATION DIVISIO

P. O. BOX 2089

SANTA FE, NEW MEXICO 87501

Mar 11 = 341

330 REQUEST FOR ALLOWABLE  
AND

## AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JACK MARKHAM

Suite 1212, 1500 Broadway, Lubbock, Texas 79401

Season(s) For Tilting (Check proper box)

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"/>	Coalinghead Gas	<input type="checkbox"/> Condensate <input type="checkbox"/>

Other (Please explain)

If change of ownership give name  
and address of previous owner \_\_\_\_\_

### DESCRIPTION OF WELL AND LEASE.

Lease Name STATE 36	Well No. 1	Pool Name, including Formation <del>BEATTY &amp; DRINKARD</del> Compared OCC Order DHC 104	Kind of Lease State, Federal or Fee STATE	Lease No B-2523
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Location  
Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East  
Line of Section 36 Township 21 S Range 36 E , NMPM, Lea County

## 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)	
TEXAS NEW MEXICO						
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)	
GETTY						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	I	36	21S	36E	Yes	

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 X	Gas Well	New Well	Workover X	Deepen	Plug Back X	Same Res'v.	Diff. Res'v. X
Date Spudded 9/22/75	Date Compl. Ready to Prod. 7/15/83		Total Depth 6831			P.B.T.D. 6831			
Elevations (D.F., R.A.B., RT, GR, etc.) 3482 FR; 3494 KB-Datum		Name of Producing Formation Blinebry & Drinkard		Top Oil/Gas Pay 6525			Tubing Depth 6667		
Perforations 6525 - 6586							Depth Casing Shoe		

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11 inch	8-5/8 inch	1190	500 SX CIRC
7-7/8 inch	5-1/2 inch	6826	950 SX TOC 2500
	2-3/8 inch	6667	

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 oil available for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 7-15-83	Date of Test 3-2-84	Producing Method (Flow, pump, gas lift, etc.) PUMP	
Length of Test 24 hrs	Tubing Pressure 120	Casing Pressure 40	Choke Size 2"
Actual Prod. During Test 21	Oil-Bbls. 11	Water-Bbls. 10	Gas-MCF 137

## GAS WELL

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

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.

806-763-8211

AGENT

3/6/84

(Total)

(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 6 1984, 19

BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

**TITLE** \_\_\_\_\_

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells 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.

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

RECEIVED  
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