

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.U.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator
SHELL WESTERN E&P INC.Address
P. O. BOX 991, HOUSTON, TEXAS 77001

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name LIVINGSTON	Well No. 14	Pool Name, Including Formation WANTZ ABO R-7607 (8-1-84)	Kind of Lease State, Federal or <input checked="" type="radio"/> Fee	Lease No.
Location Unit Letter <u>M</u> : <u>3500</u> Feet From The <u>SOUTH</u> Line and <u>367</u> Feet From The <u>WEST</u> Line of Section <u>3</u> Township <u>21-S</u> Range <u>37-E</u> , NMPM, <u>LEA</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> SHELL PIPE LINE CORPORATION	Address (Give address to which approved copy of this form is to be sent) BOX 1910, MIDLAND, TX 79702				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> GETTY OIL COMPANY	Address (Give address to which approved copy of this form is to be sent) BOX 1137, EUNICE, NM 88231				
If well produces oil or liquids, give location of tanks.	Unit 4	Sec. 21-S	Twp. 37-E	Is gas actually connected? YES	When 5-11-84

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 4-10-84	Date Compl. Ready to Prod. 5-11-84		Total Depth 7745'		P.B.T.D. 7657'			
Elevations (DF, RKB, RT, CR, etc.) 3428.5' GL	Name of Producing Formation WANTZ ABO		Top Oil/Gas Pay 7080'		Tubing Depth 7085'			
Perforations 7080' - 7208'					Depth Casing Shoe 7745'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
24"	20" CONDUCTOR	40'	
17-1/2"	13-3/8"	481'	475 sx Class C
12-1/4"	8-5/8"	2470'	1225 sx LITE + 200 sx C
7-7/8"	5-1/2"	7745'	565 sx LITE + 740 sx 50/50 P07 + 225 sx C

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 5-13-84	Date of Test 6-2-84	Producing Method (Flow, pump, gas lift, etc.) PUMPING	
Length of Test 24 HRS.	Tubing Pressure 30#	Casing Pressure 30#	Choke Size
Actual Prod. During Test	Oil - Bbls. 14	Water - Bbls. 1	Gas - MCF 30

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (psia, 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.

A. J. FORE

(Signature)

SUPERVISOR REG. & PERMITTING

(Title)

JUNE 11, 1984

(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 15 1984

BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT SUPERVISOR

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

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 owner, well name or number, or transporter, or other such change of condition.

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

RECEIVED
JUN 14 1984
GCD
HOLLY SPRING