

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

3. Operator
SHELL OIL COMPANY
Address
P. O. BOX 991, HOUSTON, TX 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)
TESTING ALLOWABLE - 250 BARRELS
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name LONG Well No. 4 Pool Name, including Formation EUNICE-MONUMENT (G-SA) Kind of Lease XXXXXXXXXX Fee Lease No.
Location
Unit Letter N : 660 Feet From The SOUTH Line and 1980 Feet From The WEST
Line of Section 11 Township 22-S Range 37-E , NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
SHELL PIPE LINE CORPORATION Address (Give address to which approved copy of this form is to be sent)
P. O. BOX 1910, MIDLAND, TEXAS 79702
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
GETTY OIL COMPANY Address (Give address to which approved copy of this form is to be sent)
P. O. BOX 1137, EUNICE, NEW MEXICO 88231
If well produces oil or liquids, give location of tanks. Unit K Sec. 11 Twp. 22-S Rge. 37-E Is gas actually connected? YES When 11-03-83

IV. COMPLETION DATA
Designate Type of Completion - (X) Oil Well ☒ Gas Well ☐ New Well ☐ Workover ☒ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☒
Date Spudded 3-28-47 Date Compl. Ready to Prod. 11-03-83 Total Depth 5215' P.B.T.D. 3840'
Elevations (DF, RKB, RT, GR, etc.) 3360' KB Name of Producing Formation SAN ANDRES Top Oil/Gas Pay 3698' Tubing Depth 3681'
Perforations 3698' to 3771' Depth Casing Shoe 5214'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17-1/2" 13-3/8" (36#) 258' 200 SX
11" 8-5/8" (32#) 2808' 800 SX
7-3/8" 5-1/2" (15.5#) 5214' 500 SX

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 11-05-83 Date of Test 11-20-83 Producing Method (Flow, pump, gas lift, etc.) PUMPING
Length of Test 24 hrs Tubing Pressure Casing Pressure Choke Size
Actual Prod. During Test Oil-Bbls. 6 Water-Bbls. 70 Gas-MCF 40

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.
A. J. FORE
(Signature)
SUPERVISOR REGULATORY AND PERMITTING
(Title)
DECEMBER 20, 1983
(Date)
OIL CONSERVATION DIVISION
APPROVED DEC 30 1983, 19
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT 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 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 filled for each pool in multiple completed wells.