BTATE OF NEW MEXICO IERGY AND MINURALS DEPARTMENT		ATION DIVISIO	Form C-304 Rovised 10-3-78
BANTA FE File		W MEXICO 87501	
U.4.0.0. LAND OFFICE TRANSPORTER 014.		DR ALLOWABLE	
DAB OPENATION FROMATION OFFICE		SPORT OIL AND NATURAL GAS	
Operotor	OIL COMPANY		· · · · · · · · · · · · · · · · · · ·
Address P O BO	X 4500, The Woodlands, Te		
Reason(x) for filing (Check proper bo)×j	Other (Picase explain)	nk storage – request
New Well X Recompletion Change in Ownership	Change in Transporter of: Oil Dry G Casinghead Gas Conda	Los of [Evorage [-]	l approximately 600 bbl.
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL ANI			
Lease Name Triste Draw Federal	Well No. Pool Name, Including I 1 Wildcat		Not or Fee Federal NM-11967
	980 Feel From The South LI	1090 5 . 5	
	wiship 23-S Ronge 3	0 H	
			Lea Count
DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL G	AS Address (Give address to which appr	oved copy of this form is to be sent;
Western Crude Oil, Name of Authorized Transporter of C	Inc. asinghead Gas or Dry Gas	Box 1142, Midland Texa Address (Give oddress to which oppr	
· · · · · · · · · · · · · · · · · · ·	Unit Sec. Twp. Rge.	Is gas octually connected?	hen
If well produces off or liquids, give location of tanks,	J 14 23-A 32-E		Jnknown
If this production is commingled w COMPLETION DATA	ith that from any other lease or pool,	•	
Designate Type of Completi	on = (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v, Diff. Re
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, KKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
Perforations		<u>.</u>	Depth Casing Shoe
·	TUBING, CASING, ANI	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			······································
		J	· · · · · · · · · · · · · · · · · · ·
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a nble for this de	fier recovery of total volume of load oil opth or be for full 24 hours)	and must be equal to or exceed top co-
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Pred. During Two:	Oll-Bbla.	Wator-Bbla.	Gas - MOF
	1	J	
GAS WELL Actual Prod. Tout-MCF/D	Longth of Test	Bbla. Condensate/MMCF	Gravity of Condensate
Testing Mathod (pitot, back pr.)	Tubing Pressue (Chut-in)	Cosing Pressure (Shut-1n)	Choke Size
CERTIFICATE OF COMPLIAN	CE :	・ DIL CONSERVAT ALIC 点象	•
hereby certify that the rules and points ion have been complied with	egulations of the Oil Conservation and that the information given		1001
	beat of my knowledge and belief.	BYOrig. Sign Les Clerr	ed by
		TITLE Les Clerr	
W.C. M. Cornell		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despen-	
(Signature) Sr. Production Foreman		wall, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for elli-	
(Tule) 8/28/81		All sections of this form must be thise but completely for shi able on new and recompleted walls. Fill out only Sections I, II, III, and VI for changes of own	
. (1)0	(*)	wall name or number, or transport	t by filed for each pool in multi,
•	ļ	completed wells.	