

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DATE OF FILING	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	
APPROVAL	

Jack Huff

Address

P. O. Box 471 Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

~~CASINGHEAD GAS MUST NOT BE~~
~~FLARED AFTER~~ 5/1/83
~~UNLESS AN EXCEPTION TO R-4076~~
~~IS OBTAINED.~~

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Shearn - State	1	Scarborough Yates 7-Rivers	State, Federal or Fee State	LG-0819-1

Location

Unit Letter G : 544 Feet From The South Line and 1980 Feet From The EastLine of Section 32 Township 26-S Range 37-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)
Gennian Oil Corporation	P. O. Box 1183 Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Attn: <u>Proration Department</u>
	Address (Give address to which approved copy of this form is to be sent)

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	32	26-S	37-E	No	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
10-28-82	2-2-83	3350	3293					
Deviation (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
2944.6 GR	Yates - 7-Rivers	2983	3221					
Perforations			Depth Casing Shoe					
2983-3220			3354					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	12-1/4"	38'	Not Cemented
11"	8-5/8"	1209'	Circulated
7-7/8"	4-1/2"	3354'	350 Sx
	2-7/8" Tubing	3221'	

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
2-2-83	2-28-83	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hours	Pumping	300#	3/4"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
1035 bbls.	67	968	58

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.



Superintendent

(Title)

3-15-83

(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 18 1983, 19BY ORIGINAL SIGNED BY EDDIE SEAYTITLE OIL & GAS INSPECTOR

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 conditions.

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

RECEIVED

MAR 16 1983

C.D.
FLEETS OFFICE

WELL LOCATION AND ACREAGE DEDICATION PLAT

Revised 1-4-83
Effective 1-4-83

All data must be from the outer boundaries of the Section

Operator JACK HUFF		Lease SHERRIN STATE		Well No. 1	
Oil Letter G	Section 32	Township 26S	Range 37E	County LEA	

Actual Footage Location of Well:

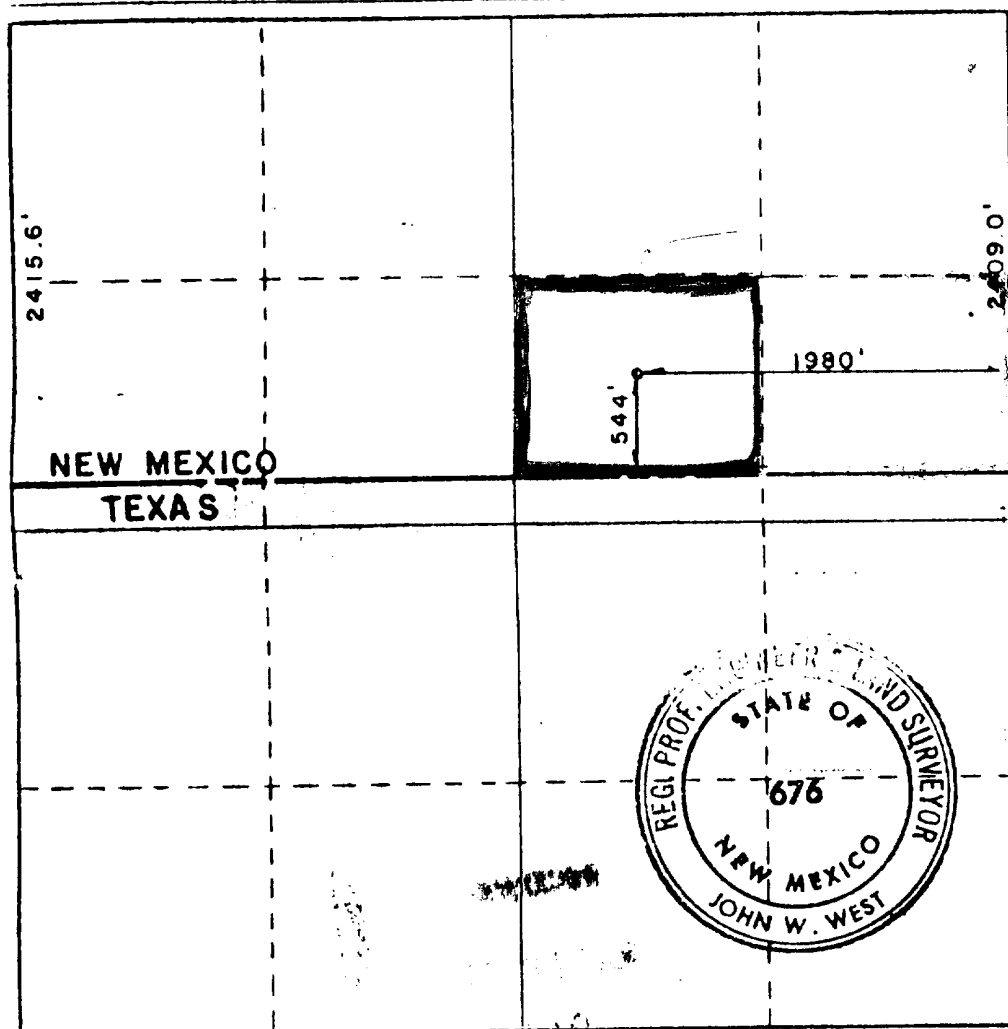
544	feet from the SOUTH	line and	1980	feet from the EAST	line
Ground Level Elev. 2944.6	Producing Formation YATES 7-RIVERS		Pool SCARBOROUGH YATES 7-R	Dedicated Acreage: 33.08 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name

CHRIS HUFF

Position

SUPERINTENDENT

Company

JACK HUFF

Date

MARCH 14, 1983

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

10/20/82
 Registered Professional Engineer
and/or Land Surveyor

Certificate No.

320 640 960 1280 1600 1920 2240 2560 2880 3200

RECEIVED

MAR 16 1983

REC'D OFFICE

RECEIVED MAR 12 1983

Hobbs, New Mexico
March 11, 1983

MR Drilling
P.O. Box 685
Monahans, Texas 79756

Dear Mr. McPeak ,

In reply to your request for forms showing the degrees of deviation in drilling a well in New Mexico, I have checked, and there is not a specific form to cover this aspect of the drilling operation.

You may use any paper, possibly your letterhead. Or, if you have forms issued by the Railroad Commission for use in Texas for this purpose, we will accept those.

Whatever form you choose to use, it must be notarized to be acceptable to our office.

Thank you.

Bonnie Prichard
E.M.D.O.C.D.