

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	
PRODUCTION OFFICE	
Operator	

Jubilee Energy Corporation

Address

3100 N. "A", Bldg. E, Suite 103, Midland, Texas 79705

Reason(s) for filing (Check proper box)

New Well

☒

Recompletion

☐

Change in Ownership

☐

Change in Transporter of:

Oil

☐

Dry Gas

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

Approval to take casinghead gas from  
this well must be obtained from the  
Minerals Management Service. *BAM*If change of ownership give name  
and address of previous ownerTHIS WELL HAS BEEN PLACED IN THE POOL  
DESIGNATED BELOW. IF YOU DO NOT CONCUR  
NOTIFY THIS OFFICE.

## I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease
Exxon "A" Federal	4	Double X Delaware <i>R7667</i>	State, Federal or Fee	Federal NM-162
Location				
Unit Letter	N	990	Feet From The	South
Line of Section	27	Township	24-S	Range
			32-E	NMPM, Lea Cou

## II. 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)	
The Permian Corporation	P. O. Box 3119, Midland, Texas 79702	
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)	
Phillips Petroleum Co.	Bartlesville, OK 74004	
If well produces oil or liquids, give location of tanks, test tanks	Unit	Sec.
N	27	24-S
		32-E
Is gas actually connected?	When	
no	30-60 days.	

If this production is commingled with that from any other lease or pool, give commingling order number:

## III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'n.	Diff.
X	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
5-2-84	5-30-84		4862'		4858'			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
	Delaware		4834'		4800'			
Perforations					Depth Casing Shoe			
4835' to 4855'								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/2"	9 5/8"		1010'		350 sx. C1 "C"			
7 7/8"	5 1/2"		4862'		200 sx. C1 "C"			
	2 7/8"		4800'					

## IV. 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 able 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.)	
5-31-84	6-11-84	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	30	40	TSTM

## 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.

(Signature)

President

(Title)

6-12-84

(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 18 1984

BY ORIGINAL SIGNED BY JERRY SEXTON

TITLE DISTRICT 1 SUPERVISOR

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

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

All sections of this form must be filled out completely for able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of co



2650 ANDJON DRIVE  
DALLAS, TEXAS 75220

P.O. BOX 222083  
DALLAS, TEXAS 75222

(214) 353-9582

Well Name & Number EXXON F&D #4

Location \_\_\_\_\_

Operator Tubelox Energy Corp.

Drilling Contractor CAP STAR

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above-described well, and that he has conducted deviation tests and obtained the following results:

Degrees & Depths

(506 1 1/4) (1011 1°) (1481 1°) (1931 1 1/4)  
(2224 1/2) (2706 1 1/4) (3201 1 3/4)  
(3671 1 3/4) (4160 2 1/2) (4562 4 1/2)  
(4783 2 3/4) (4862 2 3/4)

Drilling Contractor CAP STAR

By Jerry Coleman

THE STATE OF TEXAS ( )

COUNTY OF Midland ( )

This instrument was a known and acknowledged before me on the 13th day of June, 1984, by Jerry Coleman.

My Commission Expires:

8-14-85

Laura Morgan  
Notary Public, State of Texas  
Notary's Printed Name: LAURA MORGAN

RECEIVED  
JUN 18 1984  
O.C.D.  
MOBAS OFFICE