

OIL CONSERVATION DIVISION

P. O. BOX 2008

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF EXPLORATION PERMITS	
PERMIT NO.	
DATE	
FILE	
UNIT NO.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	NATURAL GAS
PRODUCTION OFFICE	
Operator	
Shell Western E&P, Inc.	
Address	
200 North Dairy Ashford, P.O. Box 991, Houston, Texas 77001	
Reason(s) for filing (Check proper box)	
New Well	☐
Recompletion	☐
Change in Ownership	☒
Change in Transporter oil:	
Oil	☐
Condensing Gas	☐
Dry Gas	☐
Condensate	☐
Other (Please explain)	
If change of ownership give name and address of previous owner	
Shell Oil Company, P.O. Box 991, Houston, Texas 77001	

II. DESCRIPTION OF WELL AND LEASE

Lease Name	State JM	Well No.	1	Pool Name, including Formation	Justis Blinberry	Kind of Lease	State, Federal or Free State	Lease No.	
Location	Unit Letter <u>B</u> : <u>1620</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u>								
Line of Section	02	T. or ship	25S	Range	37E	N.M.P.M.	Lea	County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
Texas New Mexico Pipeline Company	P.O. Box 52332, Houston, TX 77052					
Name of Authorized Transporter of Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P.O. Box 1492, El Paso, Texas 79978					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
No Change					Yes	NA

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Small Res.	Diff. Res.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.A.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

V. 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 allow able for this depth or be for full 24 hours)

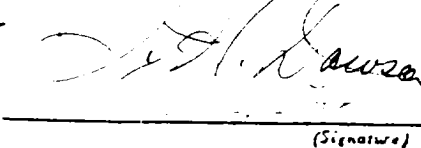
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

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



Attorney-in-Fact

(Title)

December 1, 1983 Effective January 1, 1984

(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 7 1984

BY ORIGINAL SIGNED BY JERRY SEXTON

TITLE DISTRICT 1 SUPERVISOR

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

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviated 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 multiple

RECEIVED
JAN 19 1984
O.C.D.
RECORDS OFFICE