

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Supersedes Old C-104 and C-111
Effective 1-1-65

FILE		
U.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

I.

Operator John Yuronka	
Address 102 Petroleum Bldg., Midland, Texas 79701	
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"/>
Other (Please explain) CASINGHEAD GAS MUST NOT BE FLARED 4/8/77 UNLESS IN ACCORDANCE TO R-4070 IS OBTAINED.	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Thomas	Well No. 1	Pool Name, including Formation 7 Rivers and Queen	Kind of Lease State, Federal or Fee	Lease No.
Location				
Unit Letter <u>L</u> : 1980 Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u>				
Line of Section <u>17</u> Township <u>24-S</u> Range <u>37-E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Scurlock Oil Company	Address (Give address to which approved copy of this form is to be sent) 1216 Vaughn Bldg., Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) 600 Bldg., of the SW, Midland, Texas 79701	
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 17
	Twp. 24S	Rge. 37E
	Is gas actually connected? <u>No</u> When <u>Approx. 60 days</u>	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12-29-76	Date Compl. Ready to Prod. 2-8-77		Total Depth 3685'		P.B.T.D. 3638'			
Elevations (DF, RKB, RT, GR, etc.) 3294' DF	Name of Producing Formation 7 Rivers and Queen		Top Oil/Gas Pay 3408'		Tubing Depth 3550'			
Perforations 3408'-3540' w/1SPF					Depth Casing Shoe 3685'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12"	8-5/8"		1200'		600 sxs			
7-7/8"	4-1/2"		3685'		300 sxs			
	2"		3550'					

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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 2-8-77	Date of Test 2-10-77	Producing Method (Flow, pump, gas lift, etc.) Swabbing & Flowing	
Length of Test 24	Tubing Pressure 60#	Casing Pressure 120#	Choke Size 3/4"
Actual Prod. During Test 205	Oil - Bbls. 83	Water - Bbls. 122	Gas - MCF 97

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

OIL CONSERVATION COMMISSION

APPROVED

FEB 21 1977

BY

TITLE

SUPERVISOR DISTRICT I

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.

Authorized Agent

February 16, 1977

(Date)