

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DEPARTMENT	
DIVISION	
SECTION	
FILE	
U.S.G.	
LAND OFFICE	
TRANSPORTER	
OPERATION	
PROMOTION OFFICE	
Operator	

Alpha Twenty-One Production Company

Address

2100 First National Bank Building, Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well

☒

Change in Transporter of:

Recompletion

☐

Oil

☐

Dry Gas

☐

Change in Ownership

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

If 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.
Justis B Federal	3	Langlie Mattix - Queen	State, Federal or Fee Federal	NM 4355
Location				
Unit Letter	H	1980 Feet From The North	Line and 660	Feet From The East
Line of Section	11	Township	25S	Range
			37E	NMPM, Lea County

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)
Name of Authorized Transporter of Casinghead 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?
		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 Res.	Diff. Res.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
8-14-81	10-1-81	3400	3357					
Elevations (OF, P.K.B., RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3155 Ground Level	Queen	3083	3120					
Perforations 3083, 3090, 3094, 3097, 3107, 3110, 3112, 3118, 3120, 3122, 3124, 3126, 3130, 3136, 3144, 3146, 3184, 3190, 3197, 3206, 3208, 3218, 3220 23 Perfs. (.50 Dia.)	TUBING, CASING, AND CEMENTING RECORD	Depth Casing Shoe	3400					

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	12-3/4"	30'	Redimix to Surface
12 1/4"	8-5/8"	454'	285 Sx.Cl.C.2%Cacl-Circ.
7-7/8"	5 1/2"	3400'	400 Sx.PaceSetter Lite (
			15 Lb.CaCl, 200 Sx.50-50
			Pozmix - Circ. 114 Sx.

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 oil
oil 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/MSCF	Gravity of Condensate
240	24 Hrs.	-0-	N/A
Testing Method (pitot, back p.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Pitot	70	90	48/64

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.

OIL CONSERVATION DIVISION

APPROVED _____, 19

BY _____

TITLE _____

This form is to be filed in compliance with RULE 1101.

If this is a request for allowable for a newly drilled or deepened
well, this form must be accompanied by a tabulation of the deviate
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for all
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of own
well name or number, or transporter, or other such change of condition.Separate Forms C-104 must be filled for each pool in multi-
completed wells.

Tommy Phipps

(Signature)

Executive Vice President

(Title)

October 1, 1981

(Date)