

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DEPARTMENT	
DISTRICT	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
TRANSPORTATION	
OPERATION	
PRODUCTION OFFICE	
Operator	

ConVast Energy Corporation

Address	
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Effective 1/1/82
Recompletion ☐	
Change in Ownership ☒	
Change in Transporter of:	
Oil ☐	Dry Gas ☐
Casinghead Gas ☐	Condensate ☐

If change of ownership give name and address of previous owner: Chapman & Schneider, Box 763, Hobbs, NM 88240

DESCRIPTION OF WELL AND LEASE		IC-032618 (A)
Lease Name	Well No.	Pool Name, Including Formation
I. B. Ogg "A"	5	Jalmat
Location	State, Federal or Foreign	above
Unit Letter	J	1980 Feet From The South Line and 1980 Feet From The East
Line of Section	35	Township 24 S Range 36 E
		Lea

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)
None-SWD Well	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	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

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 Hole
	Other (Specify)
Date Spudded	Date Completed to Prod.
	Total Depth
Elevations (D.S., R.E.B., L.T., G.R., etc.)	Name of Producing Formation
	Top Oil/Gas Pay
Perforations	Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE
	DEPTH SET
	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of lead oil and must be equal to or exceed top oil able for this depth or be for full 24 hours)	
Date First New Oil Run To Tank	Date of Test
	Producing Method (Flow, Pump, Jet, etc.)
Length of Test	Tubing Pressure
	Casing Pressure
Feet and Prod. During Test	Oil - Bbls.
	Water - Bbls.
	Gas - MCF

GAS WELL	
Actual Prod. Test - MCF/D	Length of Test
	Bbls. Condensate/MCF
Testing Pressure (psia, Lb./sq. in.)	Tubing Pressure (psia - 25)
	Casing Pressure (psia - 25)
	Choke Size

CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
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.	JAN 1982
Agent	APPROVED
1/27/82	BY
	TITLE
	THIS FORM IS TO BE FILLED IN COMPLIANCE WITH RULES AND REGULATIONS OF THE OIL CONSERVATION DIVISION.
	IF THIS FORM IS REQUIRED FOR ALLOWABLE TO BE GRANTED OR OBTAINED, THIS FORM MUST BE COMPLETED IN COMPLIANCE WITH THE RULES AND REGULATIONS OF THE OIL CONSERVATION DIVISION.
	IF THIS FORM IS REQUIRED FOR OBTAINING A WELL OR CEMENTING, THIS FORM MUST BE COMPLETED IN COMPLIANCE WITH THE RULES AND REGULATIONS OF THE OIL CONSERVATION DIVISION.
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