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	GAS	
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator Shell Oil Company (Western Division)	
Address P.O. Box 1509	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State	Well No. 2	Pool Name, Including Formation Jalmat (Oil) Yates	Kind of Lease State, Federal or Fee State	Lease No. B-10709
Location Unit Letter E ; 1650 Feet From The North Line and 660 Feet From The West Line of Section 36 Township 24S Range 36E , NMPM, Lea 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"/> Texas-New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1510, 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) P.O. Box 1384, Jal, New Mexico 88252					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 36	Twp. 24S	Rge. 36E	Is gas actually connected? Yes	When Sept. 26, 1966

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 9/16/66	Date Compl. Ready to Prod. Sept. 26, 1966		Total Depth 2800'		P.B.T.D. 2782'			
Elevations (DF, RKB, RT, GR, etc.) Jalmat (Oil)	Name of Producing Formation Yates		Top Oil/Gas 2705'		Tubing Depth 2605'			
Perforations 2705', 2713', 2714', 2726', 2729', 2736', 2738', 2739', 2760', 2764'					Depth Casing Shoe 2800'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		100'		100			
11"	8 5/8"		1200'		450			
6 3/4"	4 1/2"		2800'		300			
	2"		2605'					

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 9/26/66	Date of Test 9/27/66	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 13 hrs.	Tubing Pressure 40 psi	Casing Pressure pkr	Choke Size Open
Actual Prod. During Test 52B0	Oil-Bbls. 52	Water-Bbls. 0	Gas-MCF 122

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.


R. E. Cabaniss
(Signature)

Division Production Superintendent

September 28, 1966

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED

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BY

TITLE

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.