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

Form C-104
Superseding Old C-104 and C-1
Effective 1-1-65

RECEIVED

MAY - 1 1978

I.

Operator HNG Oil Company		O.C.C.
Address P.O. Box 2267, Midland, Texas 79702		ARTESIA, OFFICE
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 Woods ⁹ Com.	Well No. 1	Pool Name, including Formation Malaga West (Morrow)	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter J	1980	Feet From The South	Line and	2000	Feet From The East
Line of Section 9	Township 24-S	Range 28-E	NMPM,	Eddy	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/>	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/>	or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
El Paso Gas Co.		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 8
					Will be connected 5-1-78

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
		X	X					
Date Spudded 11-21-77	Date Compl. Ready to Prod. 2-20-78	Total Depth 12752	P.B.T.D. 12672					
Elevations (DF, RKB, RT, GR, etc.) GR-3024.3	Name of Producing Formation Morrow	Top Oil/Gas Pay 12230	Tubing Depth 9931					
Perforations 12380-12398-5 4. holes 12465-12473-5 .41 holes	12574-12578-5 .41 holes		Depth Casing Shoe 10268.75					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2	13-3/8"	677'	400 sx TLW&200 sx CI					
12-1/2	9-5/8"	2453'	1500 sx TLW&300 sx CI					
8-1/8	7"	10250'	800 sx TLW&500 sx CI					
Tubing	2-7/8"	9931'						

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	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 185	Length of Test 5 hrs.	Bbls. Condensate/MCF Dry	Gravity of Condensate -0-
Testing Method (pilot, back pr.) Positive Choke	Tubing Pressure (shut-in) 4000	Casing Pressure (shut-in) Pkr.	Choke Size 3/64

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.

Dan C. Jones Dan C. Jones
(Signature)
Sr. Regulatory Clerk
(Title)
4/28/78
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 11 1978 19
BY W. A. Gressett
TITLE SUPERVISOR, DISTRICT II

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.