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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-110
Effective 1-1-78

OCT 31 1979

O. C. C.
ARTESIA, OFFICE

Operator HNG Oil Company		
Address P. O. Box 2267, Midland, Texas 79702		
Reason(s) for filing (Check proper box)	Additional Change in Transporter of:	Other (Please explain)
New Well <input type="checkbox"/>	Oil <input type="checkbox"/>	To add transporter for rig fuel
Recompletion <input type="checkbox"/>	Dry Gas <input checked="" 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 NM 16 State	Well No. 1	Pool Name, Including Formation Malaga, West Morrow	Kind of Lease State, Federal or Fee	State	Lease No. LG-5175
Location Unit Letter B ; 660 Feet From The North Line and 1980 Feet From The East Line of Section 16 Township 24-S Range 28-E , NMFM, 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 Natural Gas Co.	Box 1492, El Paso, Texas 79978	
HNG Oil Company	Box 2267, Midland, Texas 79702	
If well produces oil or liquids, give location of tanks.	Unit NONE	Sec. Twp. Rge. Is gas actually connected? When Yes June 26, 1979

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'tv.	Diff. Res'tv.
		X						
Date Spudded 11-20-78	Date Compl. Ready to Prod. 3-22-79	Total Depth 12,841	P.B.T.D. 12,550					
Elevations (DF, RKB, RT, GR, etc.) 3033' GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 12,341	Tubing Depth 10,046					
Perforations 12,214 - 12,492			Depth Casing Shoe 10,267					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2	13-3/8	620	650					
12-1/2	9-5/8	2450	1700					
8-1/2	7	10267	1350					
	2-3/8 Tubing	10046						

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	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.

Betty A. Gildon
(Signature)
Regulatory Clerk
(Title)
October 30, 1979
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 1 1979
BY W. A. Gussitt
SUPERVISOR, DISTRICT II
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 Form C-104 must be filed for each well to maintain