

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

API 30-045-23436

Hixon Development Company

P.O. Box 2810, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

New Well ☒
 Recompletion ☐
 Change In Ownership ☐
 Change In Transporter of:
 Oil ☐
 Casinghead Gas ☐
 Dry Gas ☐
 Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal "C"	Well No. 6	Pool Name, including Formation Wildcat Farmington	Kind of Lease State, Federal or Fee Federal	Lease No. SF078056
Location Unit Letter F ; 1500 Feet From The North Line and 1850' Feet From The West Line of Section 5 Township 25 North Range 12 West , NMPM, San Juan 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	Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					no	wait on P/L

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 type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	Shut-in Well <input type="checkbox"/>	Work-over <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Time Res'v. <input checked="" type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 6-25-79	Date Compl. Ready to Prod. 9-1-79		Total Depth 711'		P.S.T.D. 655'			
Elevations (DF, RKB, RT, GR, etc.) 6164' GLE	Name of Producing Formation Farmington		Total Oil/Gas Pay 440'		Tubing Depth			
Perforations 440', 442', 503', 602', 627', 634', 641'					Depth Casing Shoe 681'			
TUBING, CASING, AND CEMENT RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		CACKS CEMENT			
7-7/8"	5-1/2"		33'		35			
4-3/4"	2-7/8"		681'		150			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of oil and must be allowable for this depth or be for full 24 hours)

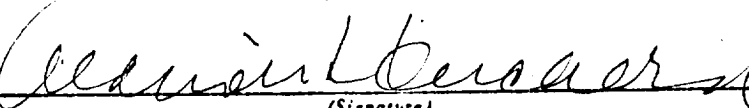
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Shore Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	24-MCF

GAS WELL

Actual Prod. Test-MCF/D 52 MCFD	Length of Test 3 hours	Bbls. Condensate/MCF 0	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in)	Casing Pressure (shut-in) 2 psig 189	Choke Size 1/2"

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.


(Signature)

Petroleum Engineer

(Title)

9-19-79

(Date)

OIL CONSERVATION COMMISSION

APPROVED **OCT 2 1979**, 19

BY **Original Signed by A. R. Kendrick**

TITLE **SUPERVISOR DISTRICT # 3**

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 data of condition