

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

Hixon Development Company

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

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 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	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
NTB State	1	WAW-Fruitland-PC	State, Federal or Fee	E-3148-7
Location:				
Unit Letter	C	790 Feet From The	North	Line and 1450 Feet From The
Line of Section	32	Township	26 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 Company		P.O. Box 990, Farmington, New Mexico	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
			Rge.
Is gas actually connected?		When	
No		Waiting on pipeline	

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	Work over	Deepen	Plug Back	Same Res/v.	Diff. Res/v.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
3-05-79	3-21-79	1300'	1261'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
6107' GL	Pictured Cliffs	1100'						
Perforations	Depth Casing Shoe							
1113'-17' 1098'-1108' 2-JSPF								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
5"	2-7/8"	1292'	150 sacks 2% Lodense					
			25 sacks Class B					
12-1/4"	6"	30'	10 sacks					

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.)	
	3-21-79		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Test-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
144	3 hours		DISC. 3
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Back Pressure		220 psig	3/4"

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.

Petroleum Engineer

March 21, 1979

OIL CONSERVATION COMMISSION

APPROVED MAR 26 1979, 19

BY Original Signed by A. R. Kendrick

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 other circumstances or other conditions of production.