

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator **D. J. Simmons**

Address **3815 McCart Street - Fort Worth, Texas 76110**

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☐ Casinghead Gas ☐ Condensate ☐

Change in Ownership ☐

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name L. V. Hamner "B"	Well No. 1A	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease Fed. SF 080245B State, Federal or Fee	Lease No.
Location				
Unit Letter J : 1750 Feet From The South Line and 1690' Feet From The East				
Line of Section 29 Township 29 North Range 9 West , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) 4775 Indian School Road Albuquerque, New Mexico 87110			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 990 Farmington, N.M. 87401			
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 29	Twp. 29N	Rge. 9W
Is gas actually connected?		When pipeline connection is made.		
No				

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'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 9-9-80	Date Compl. Ready to Prod. 9-22-80		Total Depth 5111'		P.B.T.D. 4945'			
Elevations (D, RT, GR, etc.) 5892 GR 5907 KB	Name of Producing Formation Mesaverde		Top Oil/Gas Pay 3963'		Tubing Depth 4780'			
Perforations 3971, 3976, 3981, 4061, 4083, 4089, 4221, 4227, 4319, 4329, 4350, 4355, 4407, 4467, 4473, 4563, 4570, 4577, 4582, 4588, 4597, 4604, 4610, 4615, 4621, 4664, 4675, 4693.					Depth Casing Shoe 5109'.			
TUBING, CASING, AND CEMENTING RECORD					4712, 4723, 4727, 4773, 4819.			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4	9 5/8		231'		190 C1 "B"			
8 3/4	7		2683'		450			
6 1/4	4 1/2 (liner)		(2500 to 5109)		325 50-50 Pos.			

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 Q=3,064 AOE=4,690	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back press.	Tubing Pressure (shut-in) psig 880 SI 243 Flowing	Casing Pressure (shut-in) psig 880 SI 575 Flowing	Choke Size 3/4"

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Ashton B. Geren, Jr.
(Signature)

Manager for: **D.J. Simmons-Opr.**
(Title)

Oct. 2, 1980
(Date)

OIL CONSERVATION DIVISION

APPROVED **OCT 9 1980**, 19
BY **Original Signed by CHARLES GHOLSON**
TITLE **DEPUTY OIL & GAS INSPECTOR, DIST. #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 such change of condition.

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