

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

I. OPERATOR
 Operator: Hilliard Oil & Gas, Inc.
 Address: 3000 North Garfield, Suite 120, Midland, Texas 79705
 Reason(s) for filing (Check proper box):
 New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE Cedar Point Strawn R-7279 6/1/83
 Lease Name: McClellan Federal (C.M.) Well No.: 1 Pool Name: Wildcat (Strawn) Kind of Lease: Federal Lease No.: NM-19611
 Location: Unit Letter 1, 660 Feet From The East Line and 2180 Feet From The South
 Line of Section 27 Township 15S Range 30E, NMPM, Chaves County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil or Condensate Address: The Permian Corporation, Box 1183, Houston, Texas 77001
 Name of Authorized Transporter of Casinghead Gas or Dry Gas Address: Cabot Pipeline Corporation, 7120 I 40 West, Amarillo, Texas 79106
 If well produces oil or liquids, give location of tanks: Unit 1, Sec. 27, Twp. 15S, Rge. 30E, Yes, 3/25/83

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 Rest'v.	Diff. Rest'v.
X			X					
Date Spudded: 11/28/82	Date Compl. Ready to Prod.: 2/7/83	Total Depth: 11,420	P.B.T.D.: 10,767					
Elevations (DF, RKB, RT, GR, etc.): 4071' GL, 4088' KB	Name of Producing Formation: Strawn	Top Oil/Gas Pay: 10,628	Tubing Depth: 10,498					
Perforations: 10,628-636'			Depth Casing Shoe: 10,815					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	499	525 sx CI C
11"	8-5/8"	3300	1860 sx Lite, 300 sx CI H
7-7/8"	5-1/2"	10,815	495 sx CI H
7-7/8"	2-3/8"	10,498	

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: 2/6/83 Date of Test: 2/6/83 Producing Method (Flow, pump, gas lift, etc.): Flowing
 Length of Test: 24 Tubing Pressure: 500 Casing Pressure: Pkr Choke Size: 16/64"
 Actual Prod. During Test: 225 Oil-Bbls.: 225 Water-Bbls.: 0 Gas-MCF: 480

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.
 Judy Little (Signature)
 Production Accountant (Title)
 May 3, 1983 (Date)

OIL CONSERVATION COMMISSION
 APPROVED MAY 6 1983, 19_____
 BY ORIGINAL SIGNED BY JERRY SEXTON
 DISTRICT I SUPERVISOR
 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 Forms C-104 must be filed for each pool in multiply completed wells.