

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION 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-105
 Effective 1-1-65

Operator
 Jake L. Hamon

Address
 611 Petroleum Building, Midland, Texas 79701

Reason(s) for filing (Check proper box) Other (Please explain)

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 _____

DESCRIPTION OF WELL AND LEASE

Lease Name State E-8913 <i>Com</i>	Well No. 2	Pool Name, including Formation North Osudo Morrow	Kind of Lease State, Federal or Fee State	Lease No. A-1375
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Location
 Unit Letter K ; 2100 Feet From The South Line and 1830 Feet From The West

Line of Section 20 Township 20S Range 36E , NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Warren Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Phillips Building, Odessa, Texas 79760 Box 67, Monument, New Mexico 88265

If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When

K 20 20 S 36E No October 1, 1980

If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Oil Res'v.
		X	X					

Date Spudded 4-8-80	Date Compl. Ready to Prod. 9-12-80	Total Depth 11,478'	P.B.T.D. 11,379'
Elevations (DF, RKB, RT, GR, etc.) 3637' GR 3661' KB	Name of Producing Formation Morrow	Top Oil/Gas Pay 11,249'	Tubing Depth 10,542'
Perforations 11,336' to 11,346'			Depth Casing Shoe 11,473'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	12-3/4"	381'	400
11"	8-5/8"	5,618'	2450
7-7/8"	5-1/2"	10,990'	650
4-3/4"	Liner 3-1/2" Tubing 2-3/8"	11,473' 10,542'	75

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top all oil well able 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 4774	Length of Test 4	Bbls. Condensate/MMCF 16.46	Gravity of Condensate 53.0°
Testing Method (pitot, back pr.) 4 Point Back Pressure	Tubing Pressure (Shut-in) 5417	Casing Pressure (Shut-in) Packer	Choke Size 18/64

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.

Cecil H. Barton
 (Signature)
 Production Engineer
 (Title)
 September 24, 1980
 (Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
 BY Lester A. Clements
 TITLE OIL & GAS ENGINEER

This form is to be filed in compliance with RULE 110A.
 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 change of owner, well name or number, or transporter, or other such change of condition.