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U.S.C.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

I. OPERATOR

SOHIO PETROLEUM COMPANY

Address
P.O. Box 3000 Midland, TX 79702

Reason(s) for Filing (Check proper box)

New Well	☐	Change in Transporter of:		Other (Please explain)
Recompletion	☐	Oil	☐	NAME CHANGE ONLY
Change in Ownership	☐	Casinghead Gas	☐	
		Dry Gas	☐	
		Condensate	☐	

If change of ownership give name and address of previous owner

SOHIO NATURAL RESOURCES COMPANY

II. DESCRIPTION OF WELL AND LEASE

Lease Name Elliott Hinton	Well No. 1	Pool Name, including Formation Blinebry	Kind of Lease State, Federal or Fee Federal	Lease No. 002951
Location				
Unit, Sec. E 1650	Feet From The North		Line and 990	Feet From The West
Line of Section 12	Township 22S	Range 37E	, NMPM, Lea County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Texas New Mexico Pipeline	P.O. Box 1510 Midland, TX 79701
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
Northern Natural Gas Co.	2223 Dodge, Omaha, NE
If well produces oil or liquids, give location of tanks	Is gas actually connected? When
E 12 22S 37E	Yes January 1957

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.	Diff. Res.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevation of Wellhead	Nearest Producing Formation		Casinghead Gas		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
CASE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be open boundary of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

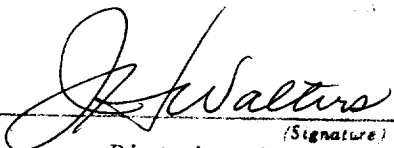
Date First Test - Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Testing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Oil & Condensate/MCF	Gravity of Condensate
Testing Method (pilot, 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.



District Superintendent

(Title)

(Date)

8/05/82

OIL CONSERVATION COMMISSION

APPROVED AUG 11 1982
ORIGINAL SIGNED BY
BY JERRY SEXTON
TITLE DISTRICT 1 SUPR.

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.

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JAN 16 1980

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AUG 6 1982

O.C.D.
HOLDS OFFICE