

**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

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

Operator
Hamon Operating Company

Address
611 Petroleum Building, Midland, Texas 79701

Reason(s) for filing (Check proper box)

| | | |
|--|---|--|
| New Well <input type="checkbox"/> | Change in Transporter of: | Other (Please explain) |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> | Change operator name from Hamon Oil Company to Hamon Operating Company |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> | [REDACTED] |
| | Dry Gas <input type="checkbox"/> | |
| | Condensate <input type="checkbox"/> | |

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

DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------------|--|--|-------------------------------|
| Lease Name Amerada Federal | Well No. 1 | Pool Name, including Formation Osuda Morrow, North | Kind of Lease State, Federal or Fee Federal | Lease No. 95-000437 |
| Location Unit Letter N ; 660 Feet From The South Line and 1980 Feet From The West | | | | |
| Line of Section 17 Township 20-S Range 36-E , 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"/> | Address (Give address to which approved copy of this form is to be sent) |
| The Permian Corporation | P. O. Box 1183, Houston, Texas 77251 |
| 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) |
| Phillips Petroleum Company Warren Petroleum Company | 4001 Penbrook, Odessa, Texas 79762 Box 67, Monument, New Mexico 88265 |
| If well produces oil or liquids, give location of tanks. | is gas actually connected? when |
| Unit N Sec. 17 Twp. 20S Rge. 36E | Yes 10-22-66 |

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. | Diff. Res'v. |
|-------------------------------------|-----------------------------|----------|-----------------|----------|--------|-------------------|-------------|--------------|
| <input checked="" type="checkbox"/> | | | | | | | | |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | | P.B.T.D. | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | | Tubing Depth | | |
| Perforations | | | | | | Depth Casing Shoe | | |

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|--------------|
| | | | |
| | | | |
| | | | |

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 | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pitot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size |

I. 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. Cantor
(Signature)
Production Engineer
(Title)
August 14, 1985
(Date)

OIL CONSERVATION COMMISSION

APPROVED **OCT 2 1 1985**, 19_____
BY JERRY SEXTON
TITLE DISTRICT SUPERVISOR

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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