

**OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

I.

|   |  |
|---|--|
| Operator<br>Hawkins Oil & Gas, Inc.   | Well API No.<br>30-025-27506   |
| Address<br>400 So. Boston, Suite 800 Tulsa, OK 74103                                    |  |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) |  |
| New Well <input type="checkbox"/>   | Change in Transporter of:  |
| Recompletion <input type="checkbox"/>   | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>  |
| Change in Operator <input type="checkbox"/>   | Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/> 1st gas sales |

If change of operator give name and address of previous operator \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

|  |               |   |   |                     |
|--|---------------|---|---|---------------------|
| Lease Name<br>Landlady   | Well No.<br>1 | Pool Name, including Formation<br>Caprock Wolfcamp, North | Kind of Lease<br>State, <del>Federal</del> <del>Lease</del> | Lease No.<br>L-6528 |
| Location<br>Unit Letter <u>J</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u> Line<br>Section <u>8</u> Township <u>12S</u> Range <u>32E</u> , <u>NMPM</u> , Lea. _____ County _____ |               |   |   |                     |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|   |  |
|---|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate<br>Scurlock Permian Corporation                               | Address (Give address to which approved copy of this form is to be sent)<br>P.O. Box 4648 Houston, TX 77210-4648         |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/><br>Shoreham Pipeline Company | Address (Give address to which approved copy of this form is to be sent)<br>333 Clay Street, Ste 4010, Houston, TX 77002 |
| If well produces oil or liquids, give location of tanks.  | Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When?   |
|   | J   8   12S   32E   Yes   April 5, 1994  |

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 |
| 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 Shoes |            |            |

TUBING, CASING AND CEMENTING RECORD

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

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 Tank | 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 (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size            |

VI. OPERATOR 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.

*Kathy B. McGuire*  
Signature  
Kathy B. McGuire/Engineering Assistant  
Printed Name  
April 14, 1994  
Date  
(918) 585-3121  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 21 1994

By ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

Title \_\_\_\_\_

- INSTRUCTIONS: This form is to be filed in compliance with Rule 1104
- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
  - 2) All sections of this form must be filled out for allowable on new and recompleted wells.
  - 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
  - 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

APR 20 1994

OFFICE