

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.U.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator
HNG OIL COMPANY

Address
P. O. Box 2267, Midland, Texas 79702

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 _____

DESCRIPTION OF WELL AND LEASE *Pitchfork Ranch Atoka K-1334 (9-1-83)*

Lease Name Pitchfork 34 Federal Com.	Well No. 1	Pool Name, Including Formation Wildcat Atoka	Kind of Lease State, Federal or Fee Federal	Lease No. 16138
--	----------------------	--	--	---------------------------

Location
Unit Letter **L** ; **1980** Feet From The **south** Line and **660** Feet From The **west**
Line of Section **34** Township **24S** Range **34E** 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) P. O. Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2521, Houston, Texas 77002

If well produces oil or liquids, give location of tanks.
Unit **L** Sec. **34** Twp. **24S** Rge. **34E** Is gas actually connected? **No** When _____

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.
		X	X					

Date Spudded 11-11-82	Date Compl. Ready to Prod. 6-10-83	Total Depth 15,435'	P.B.T.D. 14,103'
Elevations (DF, RKB, RT, GR, etc.) 3394' GR	Name of Producing Formation Atoka	Top Oil/Gas Pay 13,924'	Tubing Depth 2-7/8" at 12,723'
Perforations 13,924' - 13,930'			Depth Casing Shoe 13,250'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	600'	315
12-1/4"	9-5/8"	5250'	3500
8-3/4"	7"	13250'	1100
6-1/8"	4-1/2" Liner	15435' TOT: 12721'	475

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 2100	Length of Test 24 hours	Bbls. Condensate/MMCF .005	Gravity of Condensate 30.5
Testing Method (pilot, back pr.) Back Pressure	Casing Pressure (Shut-in) 8200#	Casing Pressure (Shut-in) Sealed	Choke Size 7/64"

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.

Betty Gildon
Betty Gildon (Signature)
Regulatory Analyst
June 15, 1983 (Date)

OIL CONSERVATION DIVISION
SEP 12 1983

APPROVED _____, 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 deviate 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 multiple completed wells.

RECEIVED
JUN 21 1983
C-10
HOBBY OFFICE

RECEIVED
JUN 21 1983
C-10
HOBBY OFFICE