

NO. OF COPIES RECEIVED	
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-101 and
Effective 1-1-65

Operator

Humble Oil & Refg Co.

Address

Box 1600 - Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
Hesse - Federal	2	Double L Queen (Chaves)	State, Federal: Fee
Location			
Unit Letter	1980	Feet From The	Line and
E		N	330
Line of Section	7	Township	15-S
		Range	30-E
		NMSP	Chaves

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Scurlock Oil Co.	Mid America Bldg - Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Vented						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	E	7	15-S	30-E	No	

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'ty.	Diff. Res'ty.
X	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
5/23/70	6/17/70	2060						
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Double L Queen Chaves	Queen	1998	1900					
Perforations			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11	8 5/8"	423	300
7 7/8	4 1/2"	2060	200

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 of
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.)
6/17/70	6/17/70	Pump
Length of Test	Tubing Pressure	Casing Pressure
2 1/2		
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
155	80	75
		Gas - MCF
		22

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/LB-MCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.

Permit

(Signature)

Unit Head

(Title)

6/19/70

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

SUPERVISOR DISTRICT

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep
well, this form must be accompanied by a tabulation of the day
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for
able on new and recompleted wells.Fill out Sections I, II, III, and VI only for changes of
well name or number, or transporter or other such change of con
Separate Forms C-104 must be filed for each pool in each