NEW MEXICO OIL CONSERVATION COM S...SSICR E C E I V E (Dm c-104) Santa Fe, New Mexico Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABISE P 3 0 1960New Well Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to an trompleted. Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 Was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

					(Place)	New	xice	••••••	(Date)
ARE HE		-	NG AN ALLOW						
/ Comp	Hondo any or Ope		n-Yatos	State !A! (Lease)	, Well No		, in	5 4 1/	4
			, т 17-5 ,	• •	NMPM.,	Ear	ire Aba.	Undesign	atad Pool
Unit Lotter	r '								
EC	ldy.	·····	County. Date	Spudded	-10-00	Danth	Drilling Co	pleted CTRR	<u>6082</u>
Please	indicate lo	cation:							
D C	В	A	PRODUCING INTER		Name	51 7100.			
	_	<u> </u>	Perforations	5980	- 5990 2	/1t.			
5 F	G X	H	Open Hole		Dentr			Depth Tubing	5819
L K	J	I	<u>OIL WELL TEST</u> -	- Test:	obls.oil.	bb	ls water in	hrs,	Choke min. Size
				d or Fracture Ti					
<u> </u>	0	P	load oil used)	: 120 bb1s,	oil, <u>0</u>	bbls w	ater in <u>10</u>	_hrs, _0	Choke Min. Size
			GAS WELL TEST	-					
2310 F	N 16	50 F E	Natural Prod.	Test:	MCF/D	ay; Hour	s flowed	Choke	Size
hing ,Casir	ng and Ceme	nting Reco	ord Method of Test	ing (pitot, bac	k pressure, et	.c.):			
Size	Feet	Sax	Test After Aci	d or Fracture T	reatment:		MCF/	Day; Hours	flowed
			Choke Size	Method of	Testing:			<u></u>	
8-5/89	993	<u>150</u>							
5-1/20	6108	170 Ur 150 el	its incer is sand):	re Treatment (Gi	ive amounts of	materia	ls used, suc	h as acid, A -/_DS .	-50 addad
			Casing	Tubing	Date first	new tanks	02	9-60	
2" EUE	5819								
			Gas Iransporte		-				
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I hereby	certify th	at the ini	formation given a	DOVE IS TILLE AN					
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IC			4	•••••	Name	J. Des	118		
					Address BOX	125,	Artesia,	New Nex	100



SANTA FE, NEW MEXICO Revised 7/45 FED (File the original and 4 copies with the appropriate district office) SEP 30 1960 CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS D. C. C. ARTESIA, OFFICE Company or Operator Hondo-Testern-Istes Lease State 'A' Well No. 35 Unit Letter G S 27 17-S R 28-E Pool Empire Abo Indesignated County Eddy Kind of Lease (State, Fed. or Patented) State If well produces oil or condensate, give location of tanks: Unit P S 31 T 17-S R 28-E Authorized Transporter of Oil or Condensate Service Pipe Idne Company Address Address Bartes to which approved copy of this form is to be sent) Address Dates for the approved copy of this form is to be sent) If Gais is not being sold, give reasons and also explain its present disposition:
SEP 30 1960 CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS D. C. C. Company or Operator Hendo-Western-Tates Lease State 'A' Well No. 35 Unit Letter G S 32 T 17-S R 28-E Pool Repire Abo Undesignated County Hendo-Western-Tates Lease State 'A' Well No. 35 Unit Letter G S 32 T 17-S R 28-E Pool Repire Abo Undesignated County Hendo-Western-Tates Lease State 'A' Well No. 35 Unit Letter G S 32 T 17-S R 28-E Pool Repire Abo Undesignated County Hedy Kind of Lease (State, Fed. or Patented) State If well produces oil or condensate, give location of tanks: Unit P S 31 T 17-S R 28-E Address Address Give address to which approved copy of this form is to be sent) Address Pan American Pat, Corp., Box 68, Hebbs, New MericDate Connected 9-2
TO TRANSPORT OIL AND NATURAL GAS D. C. C. ARTESIA, OFFICE Company or Operator Hondo-Western-Yates Lease State 'A' Well No. 35 Unit Letter G S 32 T 17-S R 28-E Pool _ Empire Abs Undesignated County Edy Kind of Lease (State, Fed. or Patented) _ State If well produces oil or condensate, give location of tanks: Unit p S 31 T 17-S R 28-E T 17-S R 28-E Authorized Transporter of Oil or Condensate Service Pipe Id ne Gempany Address Box 337, Widlend, Terms (Give address to which approved copy of this form is to be sent) Address _ Pan American Pat, Corp., Box 68, Hobbs, Kew Meric@ate Connected _ 9-29-60
Well No
County Eddy Kind of Lease (State, Fed. or Patented) State If well produces oil or condensate, give location of tanks:Unit P S 31 T 17-8 R 28-E Authorized Transporter of Oil or Condensate Service Pipe Line Company Address Box 337, Midland, Texas (Give address to which approved copy of this form is to be sent) Authorized Transporter of Gas Empire Abo Gaseline Plant Address Give address to which approved copy of this form is to be sent)
If well produces oil or condensate, give location of tanks:Unit <u>P</u> <u>S</u> <u>31</u> <u>T</u> <u>17-S</u> <u>R</u> <u>28-E</u> Authorized Transporter of Oil or Condensate <u>Service Pipe Line Company</u> Address <u>Rox <u>337</u>, <u>Nidlend</u>, <u>Teres</u> (Give address to which approved copy of this form is to be sent) Authorized Transporter of Gas <u>Empire Abs Gassline Plant</u> Address <u>Pan American Pat</u>, <u>Gorp.</u> <u>Box 68</u>, <u>Habbs</u>, <u>New Mexic</u> ate Connected <u>9-29-60</u> (Give address to which approved copy of this form is to be sent)</u>
If well produces oil or condensate, give location of tanks:Unit <u>P</u> S 31 <u>T</u> 17-8 <u>R</u> 28-E Authorized Transporter of Oil or Condensate <u>Service Pipe Line Company</u> Address <u>Box 337, Midland, Terms</u> (Give address to which approved copy of this form is to be sent) Authorized Transporter of Gas <u>Empire Abs Gassline Plant</u> Address <u>Pan American Pat, Corp., Box 68, Habbs, New Merice ate Connected <u>9-29-60</u> (Give address to which approved copy of this form is to be sent)</u>
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(Give address to which approved copy of this form is to be sent) Authorized Transporter of Gas Expire Abo Geseline Plant Address Pan American Pat. Corp., Box 68, Hebbs, New Mexico ate Connected 9-29-60 (Give address to which approved copy of this form is to be sent)
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(Give address to which approved copy of this form is to be sent) If Gas is not being sold, give reasons and also explain its present disposition:
the second second second and second
Reasons for Filing:(Please check proper box) New Well [1]
Change in Transporter of (Check One): Oil () Dry Gas ;) C'head () Condensate ()
Change in Ownership () Other () Remarks: (Give explanation below)
Remarks: (Give explanation below)
Completed 9-29-60 as a flowing oil well.
The undersigned certifies that the Rules and Regulations of the Oil Conservation Com-
mission have been complied with.
Executed this the 29 day of Sept. 1960
By af denus by Imaguion
Approved SEP 3 0 1960 19 Title Dist. Prod. Supt.
OIL CONSERVATION COMMISSION Company Hondo Oil & Gas Gompany
By JHL aquiting Address Box 125, Artesis, New Verice

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OIL CONSERVATION COMMISSION ARTESIA DISTRICT OFFICE 10 No. Copies Received _____ DISTRIBUTION NÓ. Fr. Jaishied * 6 OPERATOR 1 SANTA FE PRONATION OFFICE STATE LAND OFFICE U. S. G. S. TRANSPORTE all --/_-BURLAU OF MAN -1 /

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