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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED
Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

MAR 02 '89

C. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Hondo Oil & Gas Company	Well API No.
Address P. O. Box 2208, Roswell, NM 88202	
Reason(s) for Filing (Check proper box) New Well <input checked="" 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 type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name H. E. West "B"	Well No. 40	Pool Name, Including Formation Grayburg Jackson	Kind of Lease State, Federal or Fee	Lease No. LC-029426-B
Location Unit Letter D : 560 Feet From The North Line and 660 Feet From The West Line Section 10 Township 17S Range 31E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas-New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, NM 88240					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1959, Midland, TX 79702					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 10	Twp. 17S	Rge. 31E	Is gas actually connected? Yes	When? 2/14/89
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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 12/22/88	Date Compl. Ready to Prod. 2/2/89		Total Depth 4021'		P.B.T.D. 3956'			
Elevations (DF, RKB, RT, GR, etc.) 3918' GR	Name of Producing Formation Grayburg San Andres		Top Oil/Gas Pay 3345'		Tubing Depth 3868'			
Perforations 3345-3425', 3475-3547', 3585-3746', 3792-3941'					Depth Casing Shoe 4021'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		603'		350 sx. Class "C"			
7 7/8"	5 1/2"		4021'		350 sx. Premium Plus			
2 3/8"			3868'		900 sx. HLC			

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 2/11/89	Date of Test 2/14/89	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size comp 4 BK
Actual Prod. During Test	Oil - Bbls. 92	Water - Bbls. 246	Gas- MCF 47

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.

Signature
Ron Brown
Engineer

Printed Name
3/1/89
Date

505/625-8760
Telephone No.

OIL CONSERVATION DIVISION

Date Approved
MAR 17 1989

By
Original Signed By
Mike Williams

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.